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ABSTRACT

This conference focused on the theme of linking programs and resources for rural special education. This conference proceeding contains an overview and conference agenda booklet, abstracts and some full texts of conference presentations, including the following sampling of papers: "A Data Based Model for the Rural Model Aide in Special Education," (Gary Glasenapp); "Compliance with Public Law 94-142 Mandates: Policy Implications," (Sandra Silver); "Classroom-Based Inservice Training: From Assessing Staff Needs to Evaluating Their Performance," (R. McWilliam et al.); "Training Regular Education Personnel to be Special Education Consultants to Other Regular Education Personnel in Rural Settings," (Dean McIntosh and Gail Raymond); "Dare to Dream: A Non-Categorical Service Delivery System," (David Barnes and Cheryle Barnes); "Teaching Job-Related Social Skills to Students with Mild Handicaps: Assessment Strategies," (Diane Baumgart and Jane Anderson); "Gifted Programs: Equal Access in Rural Areas," (Craig Howley and Aimee Howley); "Serving Rural Families of Developmentally Disabled in a Cost-Effective Manner," (Russell Hedge and Willard Johnson); "Intervention: The Art of Interfering," (Bernard Hannon and Julia Ingels); "Computer Applications for Rural Transition Programs," (Joseph DeMarsh); and "Meeting the Needs of the Rural Area Teacher of the Visually Handicapped," (Michael Bina). (JDD)

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Seventh Annual
National Rural Special Education Conference

ED 295347

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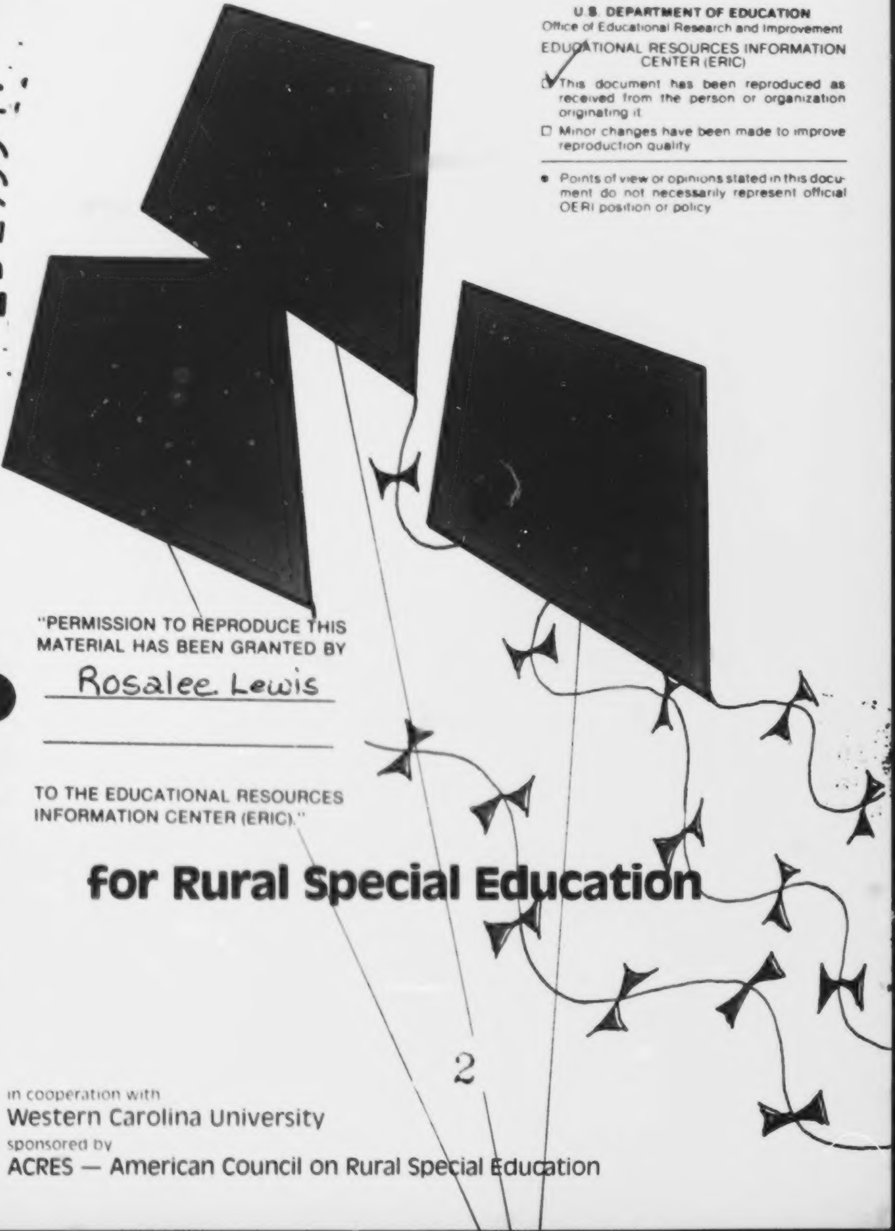

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EC 202 583

for Rural Special Education

in cooperation with
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ACRES — American Council on Rural Special Education

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WELCOME to the 1987 National Rural Special Education Conference. We wish you a productive, enlightening, and enjoyable meeting!

ABBREVIATIONS: MAJOR CONFERENCE TOPICS

Accred/Cert	Accreditation/Certification Issues
Adapt PE	Adaptive Physical Education
Admin	Administrative Issues
At Risk	At Risk Students
Comm	Community Partnerships
X Cult	Cross-Cultural Services
Curric	Curriculum and Instruction
Diag	Diagnostic/Assessment
ECI	Early Childhood Intervention
Eval	Evaluation
Fund/Res	Funding/Resources
Gift	Gifted and Talented Programs
Health/Rel	Health and Related Services (OT, PT, etc.)
Insv	Inservice Programs
IAC	Interagency Collaboration
Leg I/P	Legal Issues and Policies
Legis	Working with Legislators/School Boards
Life/Lrng	Lifelong Learning
LRE	Least Restrictive Environment
Parapro/Vol	Paraprofessional/Volunteer/Peer Training
Parent/Prof	Family/Parent Professional Relationships
Presv	Preservice Programs
Recruit/Ret	Personnel Recruitment and Retention
Rehab	Rehabilitation
Resch	Research
Roles	Roles of Special/Regular Education
SEA	State Education Agency Issues
Tech	Technology - Process and Product
Trans	Transition to Community/Employment
Transport	Transportation Strategies
Voc	Vocational Planning and Assessment

LOCAL PLANNING COMMITTEE

Bill Clauss, *Chair, Conference Planning Committee*

Bob Sluder, *Chair, Registration Subcommittee*

Pat Ricketts, *Chair, Session Facilitators Subcommittee*

Elsie Beaver and Ellen Bacon, *Co-Chairs, Media Management Subcommittee*

Sandra Westall, *Chair, Hospitality Subcommittee*

Judy Pilch and Linda Harrell, *Co-Chairs, Exhibit Subcommittee*

Jane Schulz, *Chair, Publicity/Information*

Ken Richards, *Chair, Special Events*

CONFERENCE PLANNING COMMITTEE

Charles Bentley
LuAnn Biles
P.J. Davis
Debi Decker
Pat Queen
Ann Hyde
Rita Magaha
Hoyt Ponder
Jane Stanley
Jane Stephens
Dianna Wild-Jackson

CONFERENCE STAFF

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Kim Samples
Phebe Schwartz
Judt Shrode
Chris Thiesfeld
Rosalee Lewis
Scott Manawyddan
John McBroom
Marcy Miller
Don Olcott

Doris Helge, *Executive Director*

THANK YOU...

...to the office for Rural Education at Western Carolina University for its tremendous assistance and donated support. The generous contribution of leadership staff time and other resources has made the Seventh Annual National Rural Special Education Conference a very special event.

...and to the staff of the Asheville Quality Inn on the Plaza and the Asheville Convention and Visitors Bureau. Both organizations went out of their way to assist us with the considerable task of planning and organizing a major conference. Their help is greatly appreciated. We also extend thanks to Harold "Mac" Magaha for donating his talents for our auction.

ONGOING EVENTS

Abstracts and Complete Papers

The abstracts and complete presentation papers for all conference sessions are available for review at the Registration/Information Center. Reviewing the session papers can assist you in selecting conference presentations most suited for your areas of interest and expertise.

Personnel Recruitment Center

The Recruitment Center, located in the Executive Board Room, will link educators seeking positions with agencies and institutions seeking personnel. Sign-up is at the Registration/Information Center, with interviews taking place in the Board Room. Recruitment Center Hours are from 1:00 to 5:00 pm on Tuesday and 1:20 to 5:00 pm on Wednesday and Thursday.

Exhibits and Displays

Special Education products and services wil be displayed throughtout the conference in the Gallery Suite. Please see page for exhibit and display

Thomas Wolfe House

The Thomas Wolfe House will be open for viewing from 10:00 am – 5:00 pm, Tuesday - Sunday. Please wear your ACRES badge for free admission.

Monday

1:00 - 11:00 pm	CONFERENCE REGISTRATION *Plaza Suite Foyer*
1:00 - 5:30 pm	THOMAS WOLFE HOUSE OPEN
5:00 - 7:00 pm	HOSPITALITY SUITE OPEN *Truffles*
5:30 - 7:00 pm	TASK FORCE LEADERS MEETING *Petite Salon - 12th Floor*
7:00 - 8:30 pm	ACRES RECEPTION FOR NEW MEMBERS *Hospitality Suite - Truffles*
8:30 - 11:00 pm	HOSPITALITY SUITE OPEN *Truffles*

Tuesday

8:00 - 9.00 am	CONTINENTAL BREAKFAST *Plaza Suite*
8:00 am - 8:00 pm	REGISTRATION/INFORMATION *Plaza Suite Foyer*
9:00 - 10:00 am	GENERAL SESSION *Asheville Community Theater (ACT)*
	Conference Overview and Welcome Doris Helge, Executive Director, American Council on Rural Special Education (ACRES)
	Welcome to Asheville Myron L. Coulter, Chancellor, Western Carolina University
	"Teachers Make a Difference" Gurney Chambers, Dean, School of Education and Psychology, Western Carolina University
10:00 - 10:20 am	BREAK WITH EXHIBITS AND DISPLAYS *Gallery Suite*
10:20 - 11:50 am	CONCURRENT SESSIONS
	Technologies for Training Staff and Families of People with Developmental Disabilities in Rural Areas Joel Levy *Consort Suite A* *Life/Lrng, Trans, Tech, Parent/Prof*

Tuesday

10:20-11:50am
(continued)

Developing Vocational Training Sites in Local Businesses
John Aiken, Dave DeMoss, Peggy Malicoat
Consort Suite B — *Comm, Voc.Trans*

Teaching Research Data-Based Classroom Models
Gary Glasenapp
Royal Suite — *Parapro/Vol, Accred/Cert, Presv*

The Use of Standardized Ability and Achievement Instruments with Rural Handicapped Children and Youth
Norman Hankins, Hester Clark, William Caskey, H. Booney Vance
Colonnade Suite — *Diag*

Program Evaluation for Gifted Students
Roberta Daniels
Charter Suite — *Eval, Gift*

Family-Focused Services of the Family, Infant and Preschool Program
Angela Deal, Carol Trivette, Janet Weeldreyer
Regency Suite — *ECI, Parent/Prof*

Computer-Assisted Instruction for Exceptional Students
Emily Hyatt
Room 205 — *Tech, Insv, Presv*

11:50 am - 1:10 pm

TASK FORCE WORKING LUNCHEONS

Task Forces and Coordinators:

Adapted Physical Education/Recreation
Charles Daniel — *Plaza Suite*

Cross-Cultural
Linda Reetz — *Plaza Suite*

Dissemination/Publications
Amy Allen — *Plaza Suite*

Early Childhood
Paulette Mills — *Regency Suite*

Health/Related Services
Lela Perkins — *Plaza Suite*

Interagency Collaboration
Pam Tazioli, Gayle Lane Waller — *Plaza Suite*

LEA Program Development
Bernard Hannon — *Plaza Suite*

Low Incidence Handicapping Conditions
Colleen Capper — *Plaza Suite*

Tuesday

11:50 am - 1:10 pm
(continued)

Membership Development
Kay Bull — *Room 205*

Parent Professional Relations
Pat Burns — *Colonnade Su*

Personnel Recruitment Retention
Pete Biaggio, Janice Schnorr — Plaza Suite

Policy Development
Sandra Silver, Terry Berkeley — *Plaza Suite*

Preservice
Barbara Reeves, Dee Duncan,
June Canty - Lemke — *Consort Suite A*

Professional Development
Richard Hentschel — *Plaza Suite*

Research
Stan Knox — *Consort Suite B*

Student Involvement
Betty Jean Guth — *Plaza Suite*

Technology
Winston Egan — *Charter Suite*

Transition
Ray Simches — *Royal Suite*

1:00 - 5:00 pm

PERSONNEL RECRUITMENT CENTER
Executive Board Room
(Sign up at Registration/Information center.)

1:10 - 2:40 pm

CONCURRENT SESSIONS

Playful Parenting Through 'Let's Play to Grow'
Gaye Hieb
Consort Suite A — *Rehab, Parent/Prof, Life/Lrng*

Compliance With PL 94-142 Mandates: Policy Implications
Sandra Silver
Colonnade Suite — *Resch, Leg/P, IAC*

Distance Delivery in Alaska
Marilyn Johnson, Cheryl Amundsen
Royal Suite — *X Cult, Tech, Recruit/Ret, Resch*

Using Computers to Serve Handicapped Children and Their Families
Paulette Mills, Amy Schlater
Regency Suite — *Tech, ECI, Parent/Prof*

Enhancing Capacity of Health Personnel to Provide Services to Newborns/Infants in Rural Mountain Communities
Linda Pearl, Marie Welsch
Consort Suite B — *Presv, ECI, Health/Rel*

Tuesday

1:10 - 2:40 pm
(continued)

Project LIFT: Linking Infants and Families Together
Joan Brinckerhoff
Room 205 — *ECI, Health/Rel, IAC*

2:40 - 3:00 pm

BREAK WITH EXHIBITS AND DISPLAYS
Gallery Suite

3:00 - 4:30 pm

CONCURRENT SESSIONS

Helping Parents Become More Involved in Their Children's Education
Lynda Pletcher
Regency Suite — *Parent/Prof, ECI, Comm*

State Education Agency Issues and Problem Solving
Myra Howe, Pete Biaggio
Royal Suite — *SEA, Recruit/Ret, Roles, Fund/Res*

Helping Low-Income, Rural Families with Their Young Exceptional Children
David Peters, Jane Minor, Patricia Williams
Consort Suite A — *Parent/Prof, X Cult, ECI*

Classroom-Based Inservice Training: From Assessing Staff Needs to Evaluating Their Performance
R.A. McWilliam, Kathy Garwood, Janet Chamberlain
Colonnade Suite — *Insv, ECI, Parent/Prof, Eval*

Development of Services in Early Childhood Special Education in Rural Communities
Alma Watson Davis, Andrea Lazzari
Room 205 — *IAC, Admin, ECI*

Southern Appalachian Early Intervention Program
Wesley Brown, Linda Keller, Carolyn Overbay
Consort Suite B — *ECI, Health/Rel, Diag*

Training Regular Education Personnel to be Special Education Consultants in Rural Settings
Dean McIntosh, Gail Raymond
Charter Suite — *Presv, Roles, LRE, Recruit/Ret*

4:30 - 5:30 pm

RSEQ EDITORIAL BOARD MEETING
Petite Salon - 12th Floor

4:30 - 7:00 pm

HOSPITALITY SUITE OPEN
Truffles

Tuesday

7:00 - 9:30 pm ACRES LIFTOFF TO A ST. PATRICK'S DAY GALA
Plaza Suite

Welcome
Mayor Louis Bissette

7:00 - 9:30 pm **The Lucy Herring School Square Dancers, Bumcombe County School**
"Western North Carolina in 30 Minutes or Less"
Ken Richards

Wednesday

7:30 - 8:30 am CONTINENTAL BREAKFAST
Plaza Suite

7:30 am - 7:30 pm REGISTRATION/INFORMATION
Plaza Suite Foyer

8:30 - 10:00 am GENERAL SESSION

Rural Special Education Certification Panel
Asheville Community Theatre (ACT)

Moderator: Lawrence Marrs, Dean, School of Education, Western Washington University

Panel Members:
- Kay Bull, Associate Professor, Applied Behavior Studies in Education, Oklahoma State University
- Pete Biaggio, Supervisor of Resource Programs and Service Agencies, Nebraska Department of Education
- Colleen Capper, Special Education Teacher, Red Bird School, Beverly, Kentucky
- Jane Schulz, Parent and Professor of Special Education, Western Carolina University

10:00 - 10:20 am BREAK WITH EXHIBITS AND DISPLAYS
Gallery Suite

10:20 - 11:50 am CONCURRENT SESSIONS

Physical Education and Art in a Rural Setting
Sandra Westall
Regency Suite *Curric*

Wednesday

10:20 - 11:50 am
(continued)

Dare to Dream: A Noncategorical Service Delivery System
David Barnes, Cheryle Barnes
Charter Suite — *Admin, Eval, Parent/Prof, ECI*

Networking and Advocacy for Migrant Special Education Students
Suzanne Spoden, Anne Stadler
Colonnade Suite — *X Cult, Health Rel, Rehab*

Parent Professional Partnerships: An Effective Model for Parent Involvement in Rural Schools
Anita Hodges, Kathleen Bouissey, Charlotte Sessoms, Deda Helms
Petite Salon - 12th Floor — *Parent/Prof*

Project STEP: Secondary Transition and Employment Project
Diane Baumgart, Jane Anderson
Consort Suite A — *Trans, Insv, Voc*

Ensuring Equal Access to Rural Gifted Programs
Craig Howley, Aimee Howley
Consort Suite B — *Gift, Admin, Leg I/P*

Infant and Early Childhood Intervention--Serving Rural Families of Developmentally Disabled in a Cost Effective Manner
Russell Hedge, Willard Johnson
Room 205 — *ECI, Parent/Prof*

11:50 am - 1:20 pm

TASK FORCE WORKING LUNCHEONS

Please see listing of Task Force Working Luncheons for Tuesday, pp. 3 & 4

1:20 - 5:00 pm

PERSONNEL RECRUITMENT CENTER
Executive Board Room
(Sign up at Registration/Information Center.)

1:30 - 2:30 pm

CONCURRENT SESSIONS

A Rural Model for Vocational Transition Programming
Karen Newman
Colonnade Suite — *Voc, Trans*

Therapeutic Camping Programs as an Alternative to the Self-Contained Model for Emotionally Handicapped Students
Patrick Pritchard
Royal Suite — *At Risk, Comm, IAC*

Wednesday

1:30 - 2:30
(continued)

Vermont Parent/Professional Partnership Work Groups: Families and Schools Do It Better Together
Susan Abdo, Elizabeth Milizia
Regency Suite *Parent/Prof*

Increasing Retention of Rural Special Educators Through Role Clarification
Linda Reetz
Room 205 *Roles, Admin, Resch, Recruit/Ret*

Home Activity Program for Parents and Youngsters (HAPPY)
Cybil Perkins, Sandy Thornton
Consort Suite B *ECI, Parent/Prof, Curric, Tech*

Meeting Needs of Rural Special Education in the Information Age
Patsy Tinsley, Pamela Pease, Lillian Kitchen
Consort Suite A *Tech, Comm, Insv, Gift*

Impact of the Handicapped on the Economy of Nodaway County
Jerry Wright, Gail Rooad, David Bauman
Charter Suite *Fund/Res, Comm*

2:40 - 3:40 pm

CONCURRENT SESSIONS

Rural Case Study of a Multihandicapped Child in a Full-Time Regular Class Placement
Colleen Capper
Consort Suite A *Curric, LRE, Parent/Prof*

Training for Recruitment and Retention in Rural Areas
Janice Schnorr
Colonnade Suite *Recruit/Ret, IAC*

Relationship Between Regular and Special Education: Staff Development Planning for Secondary Teachers
Richard Ballou
Royal Suite *Insv, IAC, Roles*

Strategies to Facilitate Interagency Team Planning and Coordinated Service Delivery for Severely Handicapped Infants, Toddlers and Preschoolers
Evelyn Lynch, Robyn Widley
Petite Salon - 12th Floor *IAC, ECI, Comm*

Wednesday

2:40 - 3:40
(continued)

Interactive Instructional Television: A Comparative Study of Instructional Effectiveness
M. Winston Egan
Consort Suite B — *Tech, Resch, Accred/Cert*

Urban University/Rural School Districts Exchange Training Model
Dvenna Duncan, June Canty-Lemke
Regency Suite — *Presv, Admin, Recruit/Ret*

Intervention in Rural Special Education - The Art of Interfering
Bernard E. Hannon, Julie Ingles
Room 205 — *At Risk, Parent/Prof, ECI*

3:40 - 4:00 pm

BREAK WITH EXHIBITS AND DISPLAYS
Gallery Suite

4:00 - 5:00 pm

CONCURRENT SESSIONS

Special Physical Education for Rural Nevada Schools
Brent Mangus
Consort Suite A — *Adapt PE, Health/Rel, Insv*

Project SERCh (Special Education in Rural Counties) - Meeting the Needs of the Rural School Districts in Special Education in Western South Carolina
Linda Drew-Youngblood, Doris Fitzgerald, Sharon Keesley
Charter Suite — *Accred/Cert, IAC*

Professional Planning Team Meetings
Michael Bilderback
Regency Suite — *Insv, Comm, IAC*

The Learning Disabled Gifted Child: Educational Procedures in Rural Settings
Kay Bull
Royal Suite — *Gift, ECI, Roles, LRE*

A Multidisciplinary Team Approach to Assessment in Rural Settings
John Vokurka, Phyllis Schnacke, Stephen Schnacke
Colonnade Suite — *IAC, Diag*

Transitioning Multihandicapped Preschoolers in Rural Areas
Loretta Holder-Brown, Martha Cook, Betty Wells, Jennifer Kilgo, Marion Duncan
Petite Salon - 12th Floor — *ECI, Parent/Prof, Curric, Trans*

Wednesday

4:00 - 5:00 (continued)	**Legislators' School for Youth Leadership Development** Katee Tully *Consort Suite B* *Curric, Voc, Comm*
5:00 - 7:30 pm	ACRES ADVISORY BOARD MEETING *Hospitality Suite*
5:00 - 7:30 pm	NO-HOST BAR *Plaza Suite*
6:00 - 7:30 pm	RAFFLE/AUCTION Get a unique gift for that someone special and help with the ACRES Scholarship Fund! Plaza Suite
7:30 - ??? pm	BILL STANLEY'S RESTAURANT FOR BARBEQUE, BLUEGRASS AND CLOGGING (on your own)

Thursday

6:00 - 7:00 am	FUN RUN Meet at Registration/Information Center
7:30 - 8:30 am	CONTINENTAL BREAKFAST *Plaza Suite*
7:30 am - 5:00 pm	REGISTRATION/INFORMATION *Plaza Suite Foyer*
8:30 - 10:00 am	GENERAL SESSION: AWARDS PRESENTATIONS *Asheville Community Theatre (ACT)*

National Awards for Exemplary Rural Special Education Programs

Preservice Training:
Northern Arizona University Rural Special Education Project
Janice Schnorr, Director

Early Childhood Intervention:
Birth Through Three Year Old Seriously Handicapped Program
Little Tennessee Valley Educational Cooperative
Pamela Potocik and Cynthia Marshall, Coordinators

Thursday

8:30 - 10:00 am
(continued)

Vocational Training and Transition:
Secondary Community-Based Transition
Program, Coeur d'Alene
School District #271, Coeur d'Alene, Idaho
Patrick P. Pickens, Director

Interagency Collaboration:
Yellowstone West/Carbon County Special Services
Cooperative, Laurel, Montana
Vern Barkell, Director

Severe Exceptionalities:
Hamilton-Holmes Elementary School,
King William, Virginia
Mickey VanDerwerker, Special Educator

Cross-Cultural Services:
Lake and Peninsula School District,
King Salmon, Alaska
Ron Jones, Director

1987 ACRES Rural Student Scholarship Awards
Crystal Strasburg, Nebraska
Ruth Dial Woods, North Carolina

10:00 - 10:20 am BREAK WITH EXHIBITS AND DISPLAYS
Gallery Suite

10:20 - 11:50 am CONCURRENT SESSIONS

Could the Corny Cookie Corner Work in Your School? Programming for Rural Special Education Students
Bonnie Schmalle
Charter Suite *Voc, Trans, Life/Lrng*

Assessment and Staffing of Infants Using a Transdisciplinary Team Approach
Deana Buck, Lisa Rogers
Consort Suite B *Diag, ECI*

Project SOAR: Successful Study Skills/Life Skills Formation
Jonathan Jones
Royal Suite *At Risk, Comm, Curric*

Speech-Language Pathologists: Where Are They?
Susan Kimmerly, Kathy Finsley
Regency Suite *Recruit/Ret, Accred/Cert, Health/Rel*

Thursday

10:20-11:50am
(continued)

Collaborative Planning: Transition From School to Work
Frank Simpson, Kathleen Mary Huebner
Colonnade Suite — *Trans, Parent Prof, Admin, Com*

Evaluating A Model for Special Education Programs in Rural Areas
H. Booney Vance
Room 205 — *Eval*

ETIPS Model for Early Intervention
Rhonda Folio, Dean Richey
Consort Suite A — *ECI, Parent Prof, Tech*

11:50 am - 1:20 pm

TASK FORCE WORKING LUNCHEONS
Please see listing of Task Force Working Luncheons for Tuesday, pp. 3 & 4.

1:20 - 5:00 pm

PERSONNEL RECRUITMENT CENTER
Executive Board Room
(Sign up at Registration/Information center.)

1:30 - 2:30 pm

CONCURRENT SESSIONS

Educable/Trainable Transition Cooperative Program
Becky Schroeder
Consort Suite B — *LRE, Parent/Prof, Trans*

The Practice of School Psychology in Rural Settings: A Series of Four Training Modules
James McLeskey, Jack Cummings
Room 205 — *Health/Rel, Presv*

Curriculum Planning and Program Evaluation for Disabled/Handicapped Young Adults
Ellen Elwell
Charter Suite — *Rehab, Curric, Eval, Voc*

An Approach to Computer Training for Teachers Residing in Rural Areas
Dale Lawver
Regency Suite — *Tech, Insv*

Project Bridge: Rural Transition Initiatives
Joe DeMarsh
Royal Suite — *Trans, At Risk, Comm*

Training Field Based Personnel to Supervise On-the-Job Practicum Experiences in Rural Areas
Margaret Turner, Barbara Ludlow, Wilfred Wienke
Colonnade Suite — *Presv, Accred/Cert*

Thursday

1:30 - 2:30
(continued)

Interagency Planning for Prekindergarten Exceptional Children in Rural Florida
Rebecca Pruett
Consort Suite A
ECI, IAC

2:40 - 3:40 pm

CONCURRENT SESSIONS

Quality Indicators for Programs for the Emotionally Disturbed: A Process and Model
Judy Eklund, Irene Keithcart
Colonnade Suite
Admin, At Risk, Eval

Positive Parent-Professional Partnerships: Elements for Success
Darcy Miller
Charter Suite
Parent/Prof

The Special Education Teacher and the Speech Language Pathologist: A Natural Team in a Rural Setting
Helen Kemp Gay
Consort Suite B
Curric, IAC

The Currituck Model: Mainstreaming Students into the Real World
Marcia Davies
Room 205
Trans, Voc, LRE, IAC

Brief Intervention Strategies with Ill and or Handicapped Infants and Toddlers
Cordelia Robinson, Barbara Jackson
Royal Suite
ECI, Health/Rel, Diag

Rural Options for Gifted Education
Kay Bull
Regency Suite
Gift, LRE, Curric

Collaborative Project for Inservice Training of Special Education Teachers' Aides in Rural Settings
Craig Jurgensen, P.G. Silver
Consort Suite A
Insv, Health/Rel

3:40 - 4:00 pm

Break with Exhibits and Displays
Gallery Suite

4:00 - 5:00 pm

CONCURRENT SESSIONS

Project SCORE: Supervised Career Opportunities in a Rural Environment
John Beard
Charter Suite
Trans, Diag, Eval

Thursday

4:00 - 5:00 pm
(continued)

How to Successfully Approach Your Legislator for Financial or Political Support
Sandra Stuart-Siddall
Regency Suite — *Legis, Fund/R*

Volunteer Skills Data System
Ron Frame
Colonnade Suite — *Parapro/Vol, Admin, Comm*

Hearing Conservation and Education in Rural Areas
Gary Boswell
Royal Suite — *Rehab, ECI, Diag, Tech*

Communication Skills for Rural School Personnel
James McAreavey
Consort Suite A — *Insv, Parent/Prof*

Providing Early Childhood Special Education Training to Rural Caregivers: P.A.C.E.E.R. Kits
Sue Detroy, Christine Cheney
Consort Suite B — *ECI, Insv*

Developing Positive Parent-Professional Partnerships
Patrick Lawrence
Room 205 — *Parent/Prof*

5:00 - 6:00 pm
MEETING REGARDING OPPORTUNITIES FOR DEVELOPING STATE CHAPTERS
Kay Bull — *Royal Suite*

7:00 - 9:00 pm
CANDLELIGHT TOUR OF THE BILTMORE ESTATES

Friday

7:30 - 8:30 am
CONTINENTAL BREAKFAST
Plaza Suite

7:30 am - 1:30 pm
REGISTRATION/INFORMATION
Plaza Suite Foyer

8:30 - 9:30 am
GENERAL SESSION
Asheville Community Theatre (ACT)

"Special Education: A Perspective From Developing Countries."
Lawrence Campbell, Director, Division of Education and Rehabilitation, Helen Keller International Inc.

Friday

9:35 - 11:00 am TASK FORCE LEADERS MEETING

Charter Suite

9:35 - 11:00 am CONCURRENT SESSIONS

Early Intervention in Rural States: The Impact of PL 99-457

Sandy Parsons

Royal Suite *Leg I/P, Presv, ECI*

Slaughtering the Sacred Calf: An Alternative Vocational Assessment and Training Approach

Skeet Creekmore

Consort Suite A *Voc, Diag, Eval*

Training Parents of Handicapped Students: Adjustment, Management, Communication and Legal Issues

James Jacobs

Regency Suite *Parent/Prof, Insv, Leg I/P*

Effective Work Study Program in a Suburban/Rural County

Martha Sullivan, Constance Lewis, Adrienne Lichtinger, Diane Fadely, Elmer Wolter

Room 205 *Trans, IAC, Voc*

Meeting the Needs of the Rural Area Special Education Service Provider

Michael Bina

Charter Suite *Insv*

An Innovative Approach for the Delivery of High Tech Services to Young Handicapped Children in Rural Settings

Pamela Potocik, Cynthia Marshall

Colonnade Suite *IAC, ECI, Parent/Prof*

Use of Total Communication to Facilitate Verbal Communication Development in Young Children

Carolyn Critcher, Jerome Morton

Consort Suite B *ECI, Parent/Prof, Health/Rel*

11:00 - 11:20 am BREAK WITH EXHIBITS AND DISPLAYS

Gallery Suite

11:20 - 11:50 am CRACKER BARREL SESSIONS

Innovative Inservice Training: Personnel Recruitment and Retention with Community Partnerships

Gilbert Guerin, Joseph Roberts

Colonnade Suite *Recruit/Ret, Insv, Accred/Cert*

Friday

11:20 - 11:50 am
(continued)

Teaching in Rural America: Dual Certification, A Redefinition of Regular and Special Education Roles
David Bell, Georgine Steinmiller
Consort Suite B — *Accred Cert, Ro*

Curiosity Measurement Differences Between Rural Impoverished and Urban Affluent Preschoolers
John Richardson
Regency — *Resch*

Progressive Integration of Program Evaluation Services
Doyleen Turner
Royal Suite — *Eval, Admin, IAC*

University of Florida Multidisciplinary Diagnostic and Training Program
Jo Hendrickson
Charter Suite — *Diag, Curric, Parent Prof, Roles*

Undergraduate Teaching in Early Childhood Special Education
Terry R. Berkeley, Joanne W. Putnam
Room 205 — *Presv*

Remote Education for Special Education Teachers in Rural Areas: Using Existing Technology
Timothy Pettibone, Ambrose Barry, Mary Roddy
Consort Suite A — *Tech, Insv*

On-the-Job Training Program for Rural Teachers of Students with Severe and Profound Handicaps
Barbara Ludlow, Wilfred Wienke
Petite Salon - 12th Floor — *Presv, Accred C*

11:50 am - 12:50 pm — GENERAL SESSION

Evaluation and Future Planning
Asheville Community Theatre (ACT)

1:30 - ??? — EDUCATIONAL AND FUN TOURS
Meet in hotel lobby

Saturday

HALF-DAY AND FULL-DAY TOURS
Meet in hotel lobby

EXHIBITS AND DISPLAYS

Kaplan School Supply Corporation
Lauren Clapham
P.O. Box 25408
Winston-Salem, NC 27114-5408

VTEK
Lane McCracken
1625 Olympic Blvd.
Santa Monica, CA 90404

Edmark Corporation
Gale Sevener
P.O. Box 3903
Bellevue, WA 98009

G. A. Levow, Inc.
Jack Roberts
44-48 Mechanic St.
Newton, MA 02164

Tourette Syndrome Association
Jan Farrell
41-02 Bell Blvd.
Bayside, NY 11361

Wayne Engineering
Elaine Wayne
1825 Willow Road

SpecialNet - A Special Education
Telecommunications Network
Gary Snodgrass
2021 K Street, N.W.
Suite 315
Washington, D.C. 20006

Peace Corps
Richard Haavisto
P.C. Recruiting Office
633 Indiana Avenue N.W.
Room 600
Washington, D.C. 20004

Touch MATH
Lois Nelson-Newton
Publishers Park
405 E. Colorado Avenue
Colorado Springs, CO 80903

National Rural Development Institute
American Council on Rural Special
Education (ACRES)
National Rural Education Research
Consortium
Miller Hall 359
Western Washington University
Bellingham, WA 98225

National Tuberous Sclerosis Association
Debbie Murphy
1005 Indianhead Circle
Show Hill, NC 28580

Educational Communications Systems
Kenneth L. Richards
Roland Gerstenberger
P.O. Box 828
Arden, NC 28704

Richards Publishing Company
Carol Richards
P.O. Box 66
Phoenix, AZ 13135

Pergamon Press
Jan Hoose
Mexwell House
Fairview Park
Elmsford, NY 10523
Fearon Education
Jack Shean
19 Davis Drive
Belmont, CA 94002

Recording for the Blind
Pamela Wilkison
20 Roszel Road
Princeton, NJ 08540

ETIPS Project
Rhonda Folio
Tennessee Technological Univ.
Box 5074
Cookeville, TN 38505

EXHIBITS and DISPLAYS

The Magnetic Way
James Mc Lemore
2495 N. Forest Rd.
Amherst, NY 14068

Young Adult Institute
Maureen Lynch
460 W. 34th St.
NY, NY 10001

Project Sunrise
Family Infant - Preschool Program
Robin Mc William
Western Carolina Center
300 Enola Rd.
Morganton, NC 28655

TI-IN network, Inc.
Pamela S. Pease
100 E. NASA Road #1
Webster, TX 77598

Textbooks-On-Tape Program
Angela Donahue, Media Coordinator
Franklin County Special Education Coop.
P.O. Box 440
Union, MO 63084

The Devereux Foundation
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19 South Waterloo Road
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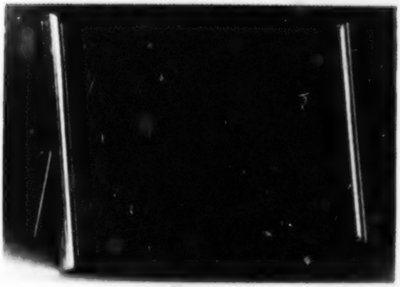

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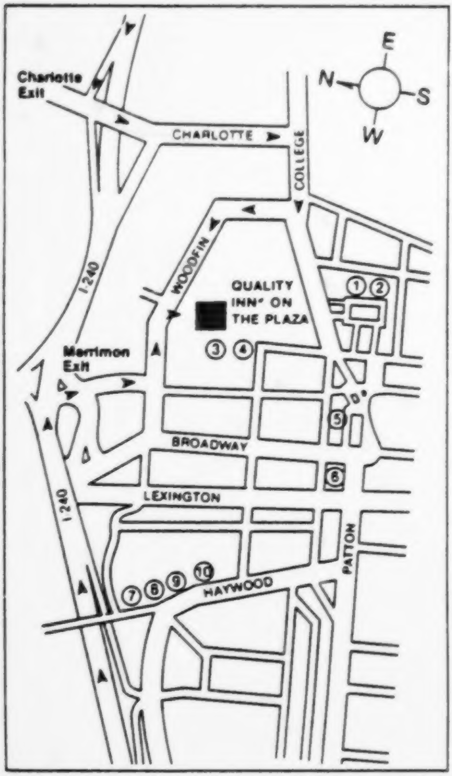
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POINTS OF INTEREST

KEY

1. City Hall
2. Court House
3. Thomas Wolfe House
4. Asheville Community Theatre
5. Biltmore Co. Bldg.
6. Northwestern Building
7. Civic Center
8. Art Museum
9. Thomas Wolfe Auditorium
10. Library

CONFERENCE PROCEEDINGS

AMERICAN COUNCIL ON RURAL SPECIAL EDUCATION

MARCH 17 - 20, 1987

SEVENTH ANNUAL NATIONAL RURAL
SPECIAL EDUCATION CONFERENCE
Presentors' List

Susan Abdo
Spec Ed Prof Develop Coord.
Vermont Dept. Of Education
120 State Street
Montpelier, VT 05602

John Aiken
Director/Project S T E P
Southeast Kansas Ed Svc Center
2601 Gabriel
Parsons, KS 67357

Cheryl Amundsen
Concordia University, Ed Dept
Ed. Tech.
1455 De Maisonneuve, Quest
Montreal, Quebec, CANADA H5G 1M8

Jane Anderson
Ed Development Specialist
University Of Idaho
Department Of Special Educatn
Moscow, ID 83840

Richard Ballou
Director Of Special Education
C E S A #11
1035 Eighth Avenue
Cumberland, WI 54829

Cheryle Barnes
Lunenburg County District
School Board
P O Box 380, Bridgewater
Nova Scotia, CANADA B4V 2W9

David Barnes
Supervisor Of Spec Education
Lunenburg County Dist S.B.
P.O. Box 380 Bridgewater,
Nova Scotia, CANADA B4V 2W9

Ambrose Barry

Univ Of Tennessee At Knoxville
212 Claxton Education Bldg
Knoxville, TN 37996

David Bauman
Associate Professor
Northwest Missouri Ste Unvrsty
W H 121
Maryville, MO 64468

Diane Baumgart
Asst. Professor
University Of Idaho
Special Education Department
Moscow, ID 83843

John Beard
Proj Coord, Project S.C.O.R.E.
Humboldt Unified School Dist.
P.O. Drawer A
Dewey, AZ 86327

David Bell
Director, Teacher Education
Arkansas College
P.O. Box 2317
Batesville, AR 72501

Terry Berkeley
Assoc Prof, Early Childhood
Spec Ed, U Of Maine At
Farmington, Dept Of Spec Ed
Farmington, ME 04938

Pete Biaggio
Consult., Nebraska Dept Of Ed
301 Centennial Mall, South
Box 94987
Lincoln, NE 68509

Michael Bilderback
Director Of Services
Doniphan County Education Coop
P.O. Box 218
Bendena, KS 66008

Michael Bina
Principal
Texas School For The Blind
1100 West 45Th Street
Austin, TX 78750-3494

Gary Boswell
Spvr, Hearing Conserv./Ed Svcs
Green Valley Area Ed Agency 14
Green Valley Road
Creston, IA 50801

Kathleen Bouissey
Parent Trainer
Parents Project
300 Enola Road
Morganton, NC 28655

BEST COPY AVAILABLE

Joan Brinckerhoff
Project L I F T/Coordinator
Portage Project
626 East Slifer Street
Portage, WI 53901

Wesley Brown
Director, Center For Early
Childhood Learning & Develop.
E. Tenn St U, P O Box 15,520A
Johnson City, TN 37614-0002

Deana Buck
Trng Consultant-Outreach Proj.
Child Develop. Resources, Inc.
P.O. Box 299
Lightfoot, VA 23090

Kay Bull
Associate Professor
Oklahoma State University
309 N. Murray Hall
Stillwater, OK 74078-0254

Gina Burkhardt
Rural Ed Facilitator/Lecturer
Rural Ed Inst./School Of Ed
East Carolina U/Willis Bldg
Greenville, NC 27858

Lawrence Campbell
Director, Education And Rehab
Helen Keller Int'L Institute
15 West 15Th St.
New York, NY 10011

June Canty-Lemke
Coordinator/Secondary Educ
University Of Portland
5000 N. Willamette Blvd.
Portland, OR 97203-5798

Colleen Capper
Special Education Teacher
Red Bird School
H C 69, Box 710
Beverly, KY 40913

William E. Caskey
Professor Of Special Education
East Tennessee State Univ
P.O. Box 18, 940A
Johnson City, TN 37614

Janet Chamberlain
Educational Consultant
Family, Infant, Preschool Prgm
300 Enola Road
Morgantown, NC 28655

Christine Cheney
Asst. Prof.
Department Of Curr & Inst.
University Of Nevada-Reno
Reno, NV 89557-0082

Hester Clark
Coor & Prof., Spec Ed.
East Tennessee State Univ
P.O. Box 18, 940A
Johnson City, TN 37614

Martha Cook
Coordinator/Project R I S E
Dept Of Special Education
Univ Of A L/P.O. Box 2592
Tuscaloosa, AL 35487-2592

Skeet Creekmore
Prof. Of Spec Ed.
N E Louisiana U
239 Strauss Hall/Dpt Of Tch Ed
Monroe, LA 71209

Carolyn Critcher
Speech-Lang Path/Brth-3 Progrm
Little T N Valley Educ Co-Op
Route 9, Box 316
Lenoir City, TN 37771

Jack Cummings
Instructor
Dept. Of Spec. Educ./Indiana U
2805 E. 10Th St. Room 170
Bloomington, IN 47405

Roberta Daniels
Coord. Of Programs
Dept. Of Spec Ed. & Spch Path
P O Box 940, Arizona State U
State University, AR 72467-0940

Marcia Davies
Teacher Of Exceptional Chrldn
Currituck County High School
P.O. Box 40
Currituck, N.C. 27929

Joe De Marsh
Director, Project Bridge
Southwest Bus. Ind./Rehab Asc.
4410 N. Saddlebag Trail
Scottsdale, AZ 85251

Dave De Moss
Executive Director
S E Kansas Ed. Svc. Cntr.
P.O. Box 176
Girard, KS 66743

Angela Deal
Child And Family Svcs Coordntr
Fmly/Infnt/Prschl/W. Crlna Ctr
300 Enola Road
Morganton, N.C. 28655

Sue Detroy
Project Coordinator
Research & Education Center
Univ. Of Nevada, Reno
Reno, NV 89557-0082

Linda Drew-Youngblood
Assoc. Prof. In Special Educ
Education Department
Lander College
Greenwood, SC 29646

Dvenna Duncan
Coordinator/Special Education
University Of Portland
5000 N. Willamette Blvd.
Portland, OR 97203-5798

Marion Duncan
Dept Of Special Education
University Of Alabama
P.O. Box 2592
Tuscaloosa, AL 35487-2592

Winston Egan
Associate Professor
University Of Utah
215 M B H
Salt Lake City, UT 84112

Judy Eklund
Coord. Of School District Svcs
Vermont Dept. Of Education
120 State Street
Montpelier, VT 05682

Ellen Elwell
Vocational Services Supervisor
C L A S S, Inc.
16 Haverhill Street
Andover, MA 01810

Diane Fadely
Howard County Public
School System
10910 Route 108
Ellicott City, MD 21043

Kathy Finsley
Coord./Communication Disorders
Department Of Education
Capitol Complex Building #6
Charleston, WV 25305

Doris Fitzgerald
Director
Graduate Studies
Lander College
Greenwood, SC 29646

Rhonda Folio
Co-Director/E T I P S Project
Tennessee Technological Univ
Box 5074
Cookeville, TN 38505

Ron Frame
Program Director
S.D. Advocacy Project, Inc.
221 South Central Avenue
Pierre, SD 57501

Kathy Garwood
Educational Consultant
Family, Infant, Prschool Progm
300 Enola Road
Morganton, NC 28655

Gary Glasenapp
Asst. Research Professor
Teaching Research
345 N. Monmouth Avenue
Monmouth, OR 97361

Gilbert Guerin
S.E.R.S. Division Head
San Jose State University
One Washington Square
San Jose, CA 95192-0078

Norman Hankins
Prof. & Chair/Hum Dev/Learning
E. Tennessee State U.
P.O. Box 18, 940A
Johnson City, TN 37614

Bernard Hannon
Dir., Spec Ed/Coop School
Services, Monnett Admin Bldg
605 Grove Street
Rensselear, IN 47978

Russell Hedge
Director, Infant/Early Child.
Program, Univ Of Kansas
P.O. Box 738
Parsons, KS 67357

Deda Helms
Parent & Former Parent
Trainer
1328 Fifth St. Circle, N.W.
Hickory, NC 28601

Jo Hendrickson
Research Coord./Univ Of Fl
Multidisciplinary Diag & Trng
Program, J 282 Health Center
Gainesville, FL 32610

Gaye Hieb
Exec. Dir., North Carolina
Let'S Play To Grow
1900 The Plaza
Charlotte, NC 28205

Anita Hodges
Project Coordinator
PARENTS Project
300 Enola Road
Morganton, NC 28655

Loreta Holder-Brown
Department Of
Special Education
P.O. Box 2592
Tuscaloosa, AL 35487-2592

Myra Howe
Program Manager
Alaska Dept Of Education
P.O. Box F
Juneau, AK 99811

Aimee Howley
Chair, Education Dept
Riggelman Hall/U Of Charleston
2300 Maccorkle Ave. S.E.
Charleston, WV 25304

Craig Howley
Writer/Editor
Appalachia Educational Lab
P.O. Box 1348
Charleston, WV 25325

Emily Hyatt
Exceptional Programs Director
Dare County Schools
P.O. Box 640
Manteo, NC 27954

Julie Ingles, D.S.E.
Boone-Clinton, Northwest
Hendricks County Joint Svc
Cooperative, 300 S. Third St
Frankfort, IN 46041

Barbara Jackson
Coordinator Of Infant Program
Meyer Chldn' Rehab Institute
444 South 44Th Street
Omaha, NE 68131

James Jacobs
Professor Of Special Ed
University Of Wyoming
P.O. Box 3374, Univ. Station
Laramie, WY 82071

Marilyn Johnson
Chairperson, Spec Ed Program
U. Of Alaska, Anchorage
3211 Providence Dr.
Anchorage, AK 99508

Willard Johnson
Infant/Early Childhood
Intervention Program/U. Of
Kansas/P.O. Box 738
Parsons, KS 67357

Jonathan Jones
Dir/Principal, Project SOAR
Westminster Preparatory School
3067 Wheeler Road
Augusta, GA 30909

Craig Jurgensen
Spec Ed Technical Consultant
Mass. Dept. Of Education
P.O. Box 51
Whately, MA 01093

Sharon Keesley

Director Of Instruction
P O Box 608
Edgefield, SC 29824

Irene Keithcart
Consltnt/Emotional Distrbnce
Vermnt Dpt. Of Ed/Spec Ed Unit
120 State Street
Montpelier, VT 05682

Linda Keller
East Tennessee State Universty
P.O. Box 15, 520A
Johsnon City, TN 37614-0002

Helen Kemp Gay
Asst Prof, Special Ed Dept
School Of Ed, East Carolina
University, Speight Building
Greenville, NC 27834

Sharon Kiefer
Outreach Project Director
Child Develop. Resources, Inc
P.O. Box 299
Lightfoot, VA 23090

Jennifer Kilgo
Dept. Of Special Education
Virginia Commonwealth Univ
1015 W. Main Street
Richmond, VA 28284

Susan Kimmerly
Consultant For Speech, Lang.,
And Hearing, Dept Of Ed
120 State Street
Montpelier, VT 05602

Lillian Kitchen
Director, Special Projects
Ti-In Network, Inc.
100 East Nasa Rd. 1
Webster, TX 77598

Patrick Lawrence
Assistant Professor
University Of Southern Alabama
Dept. Of Special Education
Mobile, AL 36688

Dale Lawver
Chair, Dept Of Special Ed.
Ball State University
2000 University Avenue
Muncie, IN 47306

Andrea Lazzari
Supervisor/Erly Chldhd Spec Ed
Virginia Department Of Eductn
Box 6Q
Richmond, VA 23216-2060

Joel Levy
Executive Director
Young Adult Institute
460 West 34Th St.
New York, NY 10001

Constance Lewis
Howard County Public School
System
10910 Route 108
Ellicott City, MD 21043

Adrienne Lichtinger
Howard County Public School
System
10910 Route 108
Ellicott City, MD 21043

Barbara Ludlow
Research Assistant Professor
504 Allen Hall
West Virginia University
Morgantown, WV 26506

Evelyn Lynch
Director, Minn. Rural Outreach
Moorhead State University
Lommen Hall 211F
Moorhead, MN 56560

Peggy Malicoat
Coordinator/Project S T E P
S.E. Kansas Ed Service Center
2601 Gabriel
Parsons, KS 67357

Brent Mangus
Assistant Professor
Univ Of Nevada, Las Vegas
School Of H P E R
Las Vegas, NV 89154

Cynthia Marshall
Coord, Schl Of Psych, Birth-3
Prog., Little Tenn Valley Ed
Coop, Route 9, Box 316
Lenoir City, TN 37771

Kathleen Mary Huebner
Natl Consultant In Educ
American Fndtn For The Blind
15 West 16Th Street
New York, NY 10011

James McAreavey
Assoc Prof Spec Ed/Psych
Northern St. College
Box 734
Aberdeen, SD 57401

James McLesky
Assoc. Prof./Chair
Dept. Of Spec Educ/Indiana U.
2805 E. 10Th St Rm. 170
Bloomington, IN 47405

R.A. McWilliam
Project S.U.N.R.I.S.E. Coordnr
Family, Infant And Prschl Prog
300 Enola Road
Morganton, NC 28655

Dean McIntosh
Associate Professor
University Of South Carolina
College Of Education
Columbia, SC 29208

Elizabeth Milizia

Vermont Dept Of Education
120 State Street
Montpelier, VT 05602

Darcy Miller
Asst. Prof. Of Sp. Ed.
Dept. Of Special Education
Carroll College
Helena, MT 59625

Paulette Mills
Coord/Rur Svc Prvdrs Training
University Of Washington
C D M R C/ E E U/ W J-10
Seattle, WA 98195

Jane Minor
Developmental Eval Center
Killian Annex
Western Carolina University
Cullowhee, N.C. 28723

Jerome Morton
Speech-Lang-Path/Birth-3 Prog
Little Tenn Valley Ed Coop.
Route 9, Box 316
Lenoir City, TN 37771

Karen Newman
Educational Services Coord.
Cochise County Ed. Services
118 So. Az. St. - Basement
Bisbee, AZ 85603

Carolyn Overbay

East Tennessee State Unvrsty
P.O. Box 15, 520A
Johnson City, TN 37614

Sandy Parsons
Assistant Professor
Univ. Of S.C./Dept Of Educ Psy
College Of Education
Columbia, S.C. 29208

Linda Pearl
Infant, Toddler Program
East Tennessee State Universty
P.O. Box 15,520A
Johnson City, TN 37614-0002

Pamela Pease
Research Director
T I - I N Network, Inc.
100 E. Nasa Road 1, Suite 201
Webster, TX 77598

Cybil Perkins
Hme Actvty Pro For Prnts/Ynsrs
Special Education Fed Programs
480 Galletti Way
Sparks, NV 89431-5574

David Peters
Area Program Supervisor
Developmental Eval Center
Box 283, W C U
Murphy, N.C. 28906

Timothy Pettibone
Assoc. Dean For Research
Univ Of Tenn/Knoxville
212 Claxton Ed Bldg.
Knoxville, TN 37996

Lynda Pletcher
Coordinator-Project S H A R E
Family, Infnt, Preschool Progm
300 Enola Road
Morganton, NC 28655

Pamela Potocik
Coord/Schl Psych Brth-3 Progrm
Little T N Valley Ed Co-Op
Route 9, Box 316
Lenoir City, TN 37771

Patrick Pritchard
Educational Coordinator
Fair Play Wilderness Camp Schl
Rt. 2, Box 213
Westminster, S.C. 29693

Rebecca Pruett
Coord/Rural Kindergarten
Interagency Project/Gadsden
Cnty School Board/P.O. Box 818
Quincy, FL 32351

Joanne W. Putnam
Co-Director
Early Childhood Project
Univ. Of Maine, Merrill Hall
Farmington, ME 04938

Gail Raymond
Asst. Prof/Dir., Ed. Svcs.
Clinic/College Of Education
University Of South Carolina
Columbia, SC 29208

Linda Reetz
Asst Prof/Dpt Of Spec Ed
University Of South Dakota
Delzell Education Bldg. 111A
U S D, Vermillion, S.D. 57069

John Richardson
Associate Professor, Educati
Clemson University/Dept Of
Elementary And Secondary Ed.
Clemson, SC 29634-0709

Dean Richey
Co-Director E T I P S Project
Tenn Technological University
Box 5074
Cookeville, TN 38505

Joseph Roberts
S.E.R.S. Program Manager
San Jose State University
One Washington Square
San Jose, CA 95192-0078

Cordelia Robinson
Director Of Special Education
Meyer Cldrn'S Rehab Institute
444 S. 44Th Street
Omaha, NE 68131

Mary Roddy

Univ Of Tennessee At Knoxville
212 Claxton Education Bldg
Knoxville, TN 37996

Lisa Rogers
Training Consultant/Outrch Pro
Child Development Resrcs, Inc.
P.O. Box 299
Lightfoot, VA 23090

Gail Rooad
Graduate Assistant
Northwest Missouri Ste Unvrsty
W H 121
Maryville, MO 64468

Amy Schlater
Scientific Programmer
University Of Washington
C D M R C/ E E U/ W J-10
Seattle, WA 98195

Bonnie Schmalle
Special Education Teacher
North Fayette Community Schls
P.O. Box 73
West Union, IOWA 52175

Phyllis Schnacke
Clinical Director
Diagnostic Ntwrk Crdntn Center
Western Kentucky University
Bowling Green, KY 42101

Stephen Schnacke
Professor
Western Kentucky University
Bowling Green, KY 42101

Janice Schnorr
Associate Professor & Director
Northern Arizona University
C.U. Box 5774
Flagstaff, ARIZONA 86011

Becky Schroeder
Director, Franklin County
Special Education Cooperative
P.O. Box 440
Union, MO 63084

Jane Schulz
Professor, Special Education
Western Carolina Univ.
Cullowhee, NC 28723

Charlotte Sessoms
Parent Liaison
Parents Project
Route 2, Box 225A
St. Pauls, NC 28384

P.G. Silver
Chairperson, Special Education
H.S.-A.B.S. Div., School Of Ed
University Of Massachusetts
Amherst, MA 01003

Sandra Silver
Asst. Prof.
Bemidji State University
Dept Prof Ed.
Bemidji, MN 56601

Frank Simpson
National Consultant On Emplmnt
American Fndtn For The Blind
15 West 16Th Street
New York, NY 10011

Suzanne Spoden
Spec Ed & Spec Svcs Director
Yuma Union High Schl Dis #70
3100 Avenue A
Yuma, AZ 85364

Georgine Steinmiller
Assistant Prof Of Special Ed
Arkansas College
Batesville, ARKANSAS 72501

Sandra Stuart Siddall
Dir., Rural Clinical Center
Calif. State Univ. - Chico
Sutter Hall, Campus Zip 301
Chico, CA 95929

Martha Sullivan
Dir. Of Special Education
Howard County Department Of Ed
10910 Route 108
Ellicott City, MD 21043

Sandy Thornton
Hme Actvty Pro For Prnts/Ynsrs
Special Education Fed Programs
480 Galletti Way
Sparks, NV 89431-5574

Patsy Tinsley
President And Founder
T I - I N Network, Inc.
100 E. Nasa Road 1, Suite 201
Webster, TX 77598

Carol Trivette
Research Associate
Fmly,Infnt & Prschl/W Crlna Ct
300 Enola Road
Morganton, N.C. 28655

Katee Tully

East Carolina University
Greenville, NC 27858

Doyleen Turner
Program Evaluation Specialist
Southeast Kansas Educ Svc Cntr
Rt. 4 Box 176
Girard, KS 66743

Margaret Turner
Clinical Instructor
West Virginia University
504 Allen Hall
Morgantown, WV 26506

Kathey Underwood
Vocational Dir.
Dare County Schools
P.O. Box 640
Manteo, NC 27954

H. Booney Vance
Research Dir/Cntr For Erly Chd
East Tennessee State U.
P.O. Box 15/520A
Johson City, TN 37614-0002

John Vokurka
Associate Professor
Western Kentucky University
College Of Ed-E X C E D
Bowling Green, KY 42101

Alma Watson Davis
Coord Tech Asst Center
Virginia Tech
234 University Office Building
Blacksburg, VA 24061

Janet Weeldreyer
Coord Of Comm Resrce Svcs
Fmly, Infnt & Prschl Program
300 Enola Road
Morganton, NC 28655

Betty Wells
Dept Of Special Education
University Of Alabama
P.O. Box 2592
Tuscaloosa, AL 35487-2592

Marie Welsch
Infant, Toddler Program
East Tennessee Ste. University
P.O. Box 15,520A
Johnson City, TN 37614-0002

Sandra Westall
Prof Spec In Rdng Disorders
Summit Academy L.D. Students
375 Pond Rd.
Spruce Pine, N.C. 28777

Robyn Widley
Coordinator
Clay County Coord Prschl Progm
Moorhead, MN 56560

Wilfred Wienke
Professor, Special Education
West Virginia University
504 Allen Hall
Morgantown, WV 26505

Patricia Williams
Developmental Evaluation Cntr
Killian Annex
Western Carolina University
Cullowhee, N.C. 23723

Elmer Wolter
Work Study Coordinator
Howard County Public Sch Systm
10910 Route 108
Ellicott City, MD 21043

Jerry Wright
Asst Prof/ Special Education
Northwest M O State University
W H 145
Maryville, MO 64468

GENERAL SESSION

TUESDAY, MARCH 17, 1987

9:00 - 10:00 AM

Welcome to Asheville--Myron Coulter, Chancellor, Western Carolina University:

Thank you very much, Doris. As you were talking and making your observations about rural education and rural areas, the first thought that popped into my mind is that you haven't seen any thing rural, yet! You are presently located in one of the major metropolitan areas of Western North Carolina. If you really want to become rural, just come to Cullowee. It is indeed rural, but we do have an east and west of Cullowee. There are about four businesses on each side of the campus. So we do feel that we have some notion of what rural is and what serving children and people in the rural areas of mountain communities amounts to.

I think that you have put together two very important qualities for this program--resources and programs. One without the other can hardly survive. You also have two other qualities in your mission and in your organization. Rural education and special education must go hand-in-hand because they depend very much on one another in so many parts of our nation. For those of us who have worked in the rural areas of the country, we are fully aware of what you mean to the children and to the people of rural communities. We learn, for instance, there may be as many as 33% of our adults who are functionally iliterate in our rural areas. There may be as many as 40-45% of those people who will be drop-outs from our schools. Someone needs to attend to those people because what you do affects not only their education, but the entire culture in which they live and the children they will serve. Ultimately, our entire economy is affected.

In North Carolina, our former governor established a task force throughout the state on "Education for Economic Development." As an outgrowth of that task force it was decided that there should be a Center for the Advancement of Teaching, and Western Carolina University was designated as the location. It's a unique concept--there are no credits given, there are no courses taught, as such, but teachers from all over our state come to our campus and spend varying periods of time, short in duration, fully supported back home. While they're on campus to recharge themselves intellectually, they become stimulated to remain in teaching--to want to stay where they are. And they go away feeling that they have rubbed shoulders and elbows with some of the finest minds in the country who come to serve as the faculty for those seminars. They get down to earth and to brass tacks when they talk about the problems which they face in the schools, often in the rural schools, with children who are different and with programs that sometimes do not accommodate those differences.

What you are doing is linking rural and special education which is extremely important to the success of those youngsters. I commend you for taking up that mission. You've come to Asheville, North Carolina which is indeed a lovely spot. Spring is on its way. We will have spring also in Cullowee, about fifty miles down the road. If you ever have an opportunity, we invite you to visit our campus and see, among other things, our Center for the Improvement of Mountain Living, in which we have taken on a very serious objective of making life better for people who live in the rural mountain areas. We have five major divisions of that center which concentrate upon creating a better life for the rural community - in the schools, in the economy, culturally, and now, even internationally. We find that there are many similiarities between the people of our rural areas and the people of rural areas in other nations and in other cultures. We learn much from one another, and so I wish you well throughout this conference. I also wish you well in your mission to assist those who are less advantaged in many ways, and to help those who can be brought into a fuller realization of what a quality life can be and what their contribution to the perpetuation of our society must be.

Welcome to Asheville, welcome to Western Carolina University. We invite you always to come to our campus, see us on our turf, and do what we can to help one another. Thank you very much for being here.

"Teachers Make a Difference"

Gurney Chambers, Dean, School of Education and Psychology, Western Carolina University:

The Office for Rural Education in the School of Education and Psychology at Western Carolina University appreciates very much the opportunity to help with the planning of this conference. We want to thank Doris, ACRES, and Western Washington University for giving us that opportunity and we hope that you enjoy your week in Asheville.

I understand that you are a motley group this morning. I understand that represented in the group are school board members, parents, elementary and secondary school teachers, perhaps school administrators, professors, and administrators from higher education. Obviously you came to this conference for a variety of reasons, but I feel sure that we have at least two common interests. One of those is that certainly all of you are interested in some area of special education. I think it is safe to assume that everyone would agree that the key link in that education chain, the key element, is the teacher who works with that special child. Excellent programs require excellent teachers. In fact, without excellent teachers you can't have excellent programs. Special students require special teachers and I'll make clear a little later what I mean by the term "special" as it relates to teachers.

With that in mind, i.e., that the teacher is the key element in effective education, I would like to take the few minutes that I have this morning to create a framework within which I think all of the activities of the week-long conference should be considered. And toward that end, I would like to tell you a short story about a very special person. It's a story about a special teacher I had one time and all of you could tell this kind of a story because everyone in this audience has had several special teachers--teachers who have meant a great deal to you over the years. In order to tell you this story and impress upon you just how influential teachers are in our lives, the kind of lasting influence that they are, to impress upon you that they are powerful permanent forces in our lives, I'm going to tell you about my first grade teacher.

Now, I could tell you about my second or third or fifth or some of my teachers in college, even a few in graduate school, but I'm going to tell you about my first grade teacher because she personifies the special teacher, the teacher who truly makes a difference in our lives. I'm going to tell you about her also because she is the farthest removed from the present time, and that will remind you of just how lasting this influence is. Longfellow said that: "When a great teacher dies, for years the light she leaves behind lights on the paths of her former students."

Over forty years ago, in a rural, remote section of Wilkes county, which is about a hundred miles northeast of here, I got on an old flattop bus to ride about fifteen miles to Wilksboro Elementary School where I was going to enroll in the first grade. That was a very frightening experience for me. I can still recall it vividly. I had hardly been to town during those first six years of my life, so going to town was frightening. Going to town to enroll in elementary school was doubly frightening, even though Wilkesboro was hardly more than a village at that time.

About an hour later, I recall getting off of that bus and walking in one end of Wilkesboro Elementary School, which in retrospect was a very ordinary looking building, a two-story brick structure. With my heart pumping madly, I walked all the way down to the end of the hallway over those wooden floors that they poured oil on to keep the dust down. It was a gloomy place because the walls had been painted a dark brown about four feet up so the little handprints wouldn't show, and waiting down there in the last classroom on the right was a very special teacher. And special students, as you know (and I was one--I had a lot of deficiencies) require special teachers. Just by accident, I was to be in the room of this wonderful human being--a person who really was not known outside of her immediate community but contributed more, I'm convinced, in the course of her career to more people than most people with national and international reputations.

Now this woman was about that tall, she had white hair and she was old. That's the thing about first grade teachers, they're all old. But you can see them five years later, fifteen years later, thirty years later and they won't have changed a bit. They look exactly the same. And in all probability, they have the same hair style and the same dress as the first day. They also have a certain smell about them--it's a nurturing smell. It makes you feel secure. I always said that if I couldn't have a mama, I would have wanted a first grade teacher and it would have been one like Miss Barber. Well, Miss Barber put her arm around me and showed me my seat in her classroom.

Let me tell you a little bit about the tremendous task that I presented to that teacher, and those who were to follow, so that you will know that it is extremely important, or, I'm reminding you really, that what we must link are special teachers with programs and special students in the rural areas. In order to make the point the way I want to make it, I'm going to have to reveal some rather private things about my background. Now, in a different context, this would be inappropriate. It would be a waste of your time and might even be in poor taste, but I am basically a teacher and I'll do anything to make a point--being teachers yourselves, you understand that. That's why I'm going to reveal these private things about my background.

I was born into and reared in abject poverty for the first fourteen years of my life. We lived in a three-room house with a leaky roof and cracks in the floors. We slept on strawticks, had no indoor plumbing and no electricity. My mother, with six stairstepped children, was a widow at age 27. My father had died an alcoholic at age 29. He had a second-grade education, my mother an eighth-grade education with no marketable skills. It is correct to say that we certainly were intellectually deprived during those very critical developmental years. My mother, with six children, trying to eke out a living, didn't have time to read us a bedtime story at night or tuck us in to bed. In fact, there was not any printed matter around to speak of. We didn't even have a rural mail box until I was in high school, so we were absolutely intellectually deprived during the critical years! Nutritionally deprived--I don't ever recall going hungry, but I'm sure we didn't always eat the right food. We ate too much fatback and milk gravy, and in all probability, we were economically and socially deprived. We had all of those diseases, if that's the proper word. We had head lice, we had itch, we had worms--and they weren't the pinworm kind. In fact, if the truth were known, probably those three things started with the Chambers children there on Hunting Creek and then they found their way into your communities a little later.

When I showed up, six years of age, at that school--that school, in a very real sense, represented the last real hope for me. There I was with all of my deficiencies, not only with a lot to learn, but a lot of undesirable things to unlearn. I murdered the English language because I had heard it spoken incorrectly for six years. And I presented myself to that wonderful, special teacher with my 10-cent haircut, the rust behind my ears, my bib-overalls, my teeth far apart, my ears too big, and I probably had a little bit of a body odor. When you have to heat water on a wood burning stove and pour it into a #3 washing tub in the winter, and it's almost as cold inside as it is outside, then it's understandable, I think, that maybe you wouldn't take a bath as often as you ought to. But I said, "Here I am, learn me if you can," and thank God that wonderful, special teacher did 'learn' me.

She was the right kind of person. To be a special teacher you must be the right kind of person, and above all else, you must like children. You must like people because, in a very real sense, we teach with what we are. We are the tool, the instrument, in the educative process. Emerson said: "That which we are, we are all the while teaching, not voluntarily, but involuntarily." So it is critical that we take into that classroom the right kind of person. Bertrand Russell, the British philosopher-mathematician, said: "There is nothing more unequal than to treat unequals equally." Thank God, even though Miss Barber had probably never heard of Bertrand Russell, she knew that, and she knew that I had my special needs, and that I was going to have to be treated differently from Bing or George or Sally. They had their needs but each needed a different kind of attention and she gave it to us.

What was she like? I want to tell you a little bit about her. This is not an exhaustive description of what special teachers must be like, but it gets at some of the things that I'm convinced all great teachers, all teachers who make a positive difference in the lives of their students, and certainly all special teachers who work with special children, ought to have. First of all she was empathetic. She had that uncanny ability, it seemed, to get inside our skins, to feel our sorrows, to experience our joys, to see things from our points of view. I could give you many stories that would illustrate this, but I'll just do one because of so little time.

One day we were in our red bird, blue bird, or yellow bird reading groups and I recall, even though I took many deficiencies with me to school, that by this time--because of Miss Barber's influence and great teaching--I was not in the poorest group, but I wasn't in the best group either. At this particular time she was working with my group and she was asking each member of the group to read from the reading book. I read the sentence and I didn't get it just right. So Miss Barber asked me to repeat it and she did it with great kindness. That's the only way she could do things. The second time, I still didn't get it right. I can't remember exactly what the problem was, but very kindly she asked me to read it again. And being a child with a very poor self-image, low self-esteem, my feelings were easily hurt. I was easily threatened and I began to cry after that second time. Miss Barber knew why I was crying, but she knew that if she let those other children in that group know for sure why I was crying that they would make fun of me, that when we went out to play they'd sing in unison: "Gurney is a cry baby, Gurney is a cry baby." So that wonderfully sensitive human being gave me a way to save face with my peers. She said, "What's the matter, Gurney, does your stomach hurt?" And it was O.K. in Wilkesboro, back in those days, for a six year-old, especially with worms being prevalent, to cry if your stomach hurt. Being a reasonably intelligent person I seized that opportunity to save face and I said "yes." Now you may have been sitting there thinking, "Oh gosh, I thought he was going to say something dramatic." It's an awfully little thing, but what we need to keep in mind is that the difference between a special teacher and the mediocre teacher is about that much. Little things in human relationships mean a lot, and to me--since I was the one who counted in this because I was the one involved--it wasn't a little thing at all. If it were so little, why do I remember it so vividly and continue, over forty years later, to appreciate that act of kindness from my teacher?

Empathy is so very, very important in working--especially with special children--but indeed, with all children. Now we ought not to expect too much of ourselves--we don't always read the situation correctly. We don't always succeed in having the message received that we intend to send. I recall when my younger daughter was in nursery school. She came home from school one afternoon and she said "Daddy, I got in a lot of trouble at school today and it was all your fault," and I said, "Well, why is that?" She said, "Well, you know at breakfast this morning when I asked you how much five hundred thousand dollars was?" and I said, "Yes, what about it?" She said, "Well, 'a hell of a lot' ain't the right answer."

Another thing that special teachers must have is energy, because teaching is hard, hard work--as you well know--especially when we're working with special students. When it's done right, there probably is no more physically, mentally, and emotionally demanding profession than teaching. It is tough, tough, tough. You'll take a group here, or a child here, and you'll work with them day after day giving them yourself, week after week, month after month--giving, giving, giving. You begin to see some progress, you begin to pat yourself on the back, and they take them away from you, give them to someone else, and run another bunch in down here, and you've got to do it all over again. So teaching is demanding. It is tough, it is hell. You all heard about the teacher who died and went to hell. It was three weeks before she noticed the difference. Recent research on effective teaching and effective schools has given support to the idea that teaching is demanding.

Special teachers--effective teachers, teachers who make a difference--have high expectations. Reasonable, but high expectations. And thank God, when I entered that first grade classroom, even though Miss Barber knew something about the history of my family--that my father worked at a sawmill and the liquor still, that most of us had dropped out of school at age sixteen--thank God that she took the position: "Gurney, I don't care what your father did, I don't care what your uncles and aunts did. Until you demonstrate to me that you can't do it, then I'm going to expect you to do it." And you know, that's a way of saying "I care about you, I love you." George Bernard Shaw said that: "The greatest sin against our fellow creatures is not to hate them, but to ignore them." To ignore someone is devastating, and Miss Barber could have smelled the body odor a bit and put me over in a corner and said "I'm going to work with those middle class children who don't have all of these deficiencies because Gurney is just going to drop out after a while." She didn't do that. In fact, when I didn't get it right the first time, when I read from the book, she said, "Do it again"--kindly, but do it again. And when I didn't get it right the second time, "Do it again." I'm glad that she did that. She was saying to me--"your growth matters to me," and in doing that was really saying "I love you, I care about you."

Goethe, the German poet/philosopher said, "If you treat a person as he is, he will stay as he is. But if you treat him as if he were, what he ought to be, and could be, he will become what he ought to be and could be." Special teachers don't treat people as they are but as they ought to be and could be, and children, people have a way of becoming what they think others think that they are. You've all heard: "I am not what I think I am, I am not what you think I am, I am what I think you think I am."

I remember seeing on T.V. several years ago Mortimer Adler, the philosopher and Great Books advocate from the University of Chicago, and William Buckley, the arch-conservative and brilliant person. They were discussing learning from the Great Books, and at one point, Buckley said to Adler, "But Mortimer, how do you know that all children can learn?" And Mortimer Adler, to his everlasting credit, said, "I don't know, but I'd rather live by my hope than by your doubt." Special teachers teach by their hope, not their doubts.

Now, having said that, we must have high expectations if children are going to become more than they are at present, if they're going to achieve. I hasten to add that those expectations must be reasonable, and sometimes we get carried away. I was reminded that I'm not always reasonable. When my younger daughter was twelve years old, one February morning she came to the breakfast table and said, "Daddy, today is Abraham Lincoln's birthday. Did you know that?" And even though I hadn't thought of it, I said, "Sure, I know that." She said, "He was a great man, wasn't he, Daddy?" I said, "Yes, he was, and when he was your age he was out splitting rails." She said, "Yeah, I know Daddy, and when he was your age he was President of the United States."

Another thing that we've been ridiculed for, and probably will continue to be, is ridicule by ignorant people. They don't understand human nature when they ridicule educators for talking about the whole child. Special teachers worry about the whole child. They know that they must be concerned about the head, the heart, the mind, the emotions, the subject matter, the self-concept, the self-esteem, the cognitive, and the affective. Now, it would be nice if we could say, "Well look, we have limited time. We can only do so much in the time that we have. So you do these things and we'll concentrate on the intellectual development of the child." But human nature is not that way. All of these dimensions of the being are intertwined in a very intricate fashion, and if you ignore one of those, you do so at the peril of all of the others. So, Miss Barber was concerned not just about my intellectual development, but she was concerned about my total being. All great teachers are concerned about the whole child, and certainly special teachers must be.

Finally, special teachers are adept at perceiving the "hidden curriculum." In every classroom, every school system, there are at least two curricula. There's the formal curriculum, or the paper curriculum--the reading, the writing, the math, the physical education, the health--the things that you get paid to teach. There's also another equally important curriculum--for lack of a better term, the "hidden curriculum." That consists of all of those invisible forces affecting the way the child deals with the reading, writing and arithmetic. And sometimes that's more powerful than the formal curricula. The special teachers can read that classroom more effectively than the mediocre teachers. They can get it from the expression on the child's face. They're not perfect, but they have that sensitivity, that perceptiveness, which is closely related to the emphathy that I talked about earlier. If time permitted I could go into great detail. I'll just mention two examples of the hidden curriculum in my own school.

In the first grade the poor slept on newspapers during rest period. At that time we were supposed to try to go to sleep for about 30 minutes in the day. The rich had their blankets that they stored in the closet. They'd bring them out during the rest period, spread them on the floor and sleep on them. The poor had only newspapers. In fact, the teacher saved newspapers over the summer, put them in the closet, brought them out, spread them on the floor, and we slept there. That's a painful thing to deal with.

Then, later in school I recall, with a great deal of pain, even in retrospect, that if you were anyone back then, you ate in the lunchroom. If you were a country hick, if you were from a rural area--poor--you brought your lunch, and you were ashamed of what you brought. You were ashamed of what you put in the containers. You were even ashamed of what you wrapped it in. The worst thing was to bring a lard bucket with a sweet potato, or an onion, or a piece of cornbread in it. And children--this was in the sixth grade when I remember this happening--believe me, are capable of making some very fine distinctions. There's a heirarchy there. Now the sensitive, empathetic teacher is the one who's adept at perceiving the hidden curriculum and is aware of these things out there that are interfering with the education process. And he or she will do all that they can to minimize the harmful effects of those kinds of things.

Miss Starr, another one of those wonderful, wonderful human beings--spinster, beautiful, white haired--Elsie Starr, I'll love her forever--she dealt with that beautifully. I kept saying I was going to thank her one of these days for what she meant to me, what she continues to mean to me, but she died before I got an opportunity. That happens all of the time. But, very quickly, just to tell you how she helped deal with that. She said, "You know, I bring my lunch of light bread sandwiches"--and she would bring her lunch on occasion, just to eat with us, those who weren't in; we were the "outies," not the "innies"--"and I would love to be able to make biscuits like Gurney brings and Ernest brings and Billy Ray brings and Sally brings, but I've tried and I just can't do it. And I just love country biscuits with blackberry jam and I'm wondering, would you be willing to trade with me someday? Would you give me a biscuit with blackberry jam for my light bread sandwich of bologna and cheese?" We loved Miss Starr so much that if she thought biscuits with blackberry jam were OK, then, by golly, they were OK. A little thing, but gosh, that meant so much to us.

Well, what did Miss Barber give me, this very special teacher? What do all special teachers give their students? They give them two things. Number one--they must give them some understanding of the subject matter, help them to acquire, to some degree, at least the skills that are appropriate for that particular grade level or grade. That's essential; it's not sufficient, but it's essential. If teachers don't do that, then they're not special teachers. But they must do one other thing. In fact, the two go together. Miss Barber helped me to begin to acquire at least the self-image, the self-esteem that was necessary to use those skills and that knowledge. And I never thanked Miss Barber for these gifts, these permanent gifts, gifts that continue to serve me well.

A few years ago I made a presentation down in Wilkes County–my home county–at an opening of a school event. Some of my former teachers were in the audience. Miss Barber, at that time, was in her nineties–living in a rest home in Fauthtown, which is near Winston-Salem, in North Carolina. The Wilkes General Patriot, a small town paper, wrote a rather detailed account of this presentation. They had to have something to fill the space and some of Miss Barber's friends cut it out and sent the story to her down at the rest home. Not long after that, I was going through my mail in the office. I had received this letter. The handwriting was a little shaky. Postmark on this was August, 1980. I turned it over and the return address was Mrs. William Barber, Hill Haven Lodge, 6601 Old Hwy. 421, Fauthtown, North Carolina. I had not seen Miss Barber in twenty-five years, at least. I knew she still lived, however. I had never thanked her for all that she meant to me–never thanked her. Hardly a day had gone by in my life in the last fifteen or twenty years that I hadn't silently thanked her for what she did for me. I want to read just a few excerpts from this letter.

"Dear Gurney: I have been flooded with clippings of your recent speech to the teachers of Wilkes County, and I want to thank you now–while I'm living–for the flowers you gave, especially since they were dropped in Wilkes County where I spent so many happy days teaching so many young children. I hope some of my teaching and influence rubbed off on some more of the children besides you." (Well, it rubbed off on thousands of children during her forty year career.) "I want you to know how very proud I am of you. You have certainly..." (well, like the special teacher, she exaggerates, so I'll skip that) "I'm at a nursing home, but able to be about unsteadily. See, the years have been added but they've been good to me. Want you to know I remember you and always loved you. Zola Barber."

Does she remember me? I doubt it. Loved me? I never doubt it. Well, finally, the great teacher, the special teacher, having taken the lead, I sat down and wrote her a letter and I want to read you that letter:

"Dear Mrs. Barber: I am going to frame your letter and hang it in my office where it will serve as a constant reminder to me as a preparer of teachers, and to my students who are prospective teachers, of the powerful and permanent influence great teachers have on their students. I shall treasure your letter and always appreciate and love you for what you did for me. During the fifteen years of my professional career, I often tell my students and others about you. I tell them that you personify the teacher who truly makes a tremendously positive difference in the lives of those children who need a lot of help. You're kind to say that I've done well. The modest success I have achieved would not have been possible without your patient and loving guidance thirty five years ago. You may rest assured that there are thousands of your former students out there who thank you almost daily for the difference you made in their lives. I can't imagine a more worthy legacy."

So Miss Barber was a special teacher. And the thing that you must do, that we in the rural areas must do--somehow, some way--is to find a way to link this most valuable of resources, special teachers, with these programs and these special students. Contrary to what you hear, the problem is not that there are so few special teachers out there; the miracle is that there are so many.

You honored me by letting me come and speak with you this morning. Thank you very much. I hope you have a good week.

CONCURRENT SESSIONS

TUESDAY, MARCH 17, 1987

10:20 - 11:50 AM

Young Adult Institute

A not-for-profit agency serving mentally retarded and developmentally disabled children and adults for over a quarter century in more than 40 programs throughout the New York metropolitan area.

460 West 34 Street, New York, N.Y. 10001-2382 • (212) 563-7474

EXECUTIVE DIRECTOR
Joel M. Levy, F.A.A.M.D.
ASSOC. EXEC. DIRECTOR
Philip H. Levy, Ph.D.

USE OF TECHNOLOGY FOR TRAINING STAFF AND FAMILIES OF PEOPLE WITH DEVELOPMENTAL DISABILITIES IN RURAL AREAS

This presentation will give an overview of the Young Adult Institute's "Television Instruction for Parent Support" projects, unique and innovative media concepts which, for the first time, provide training to parents and families of the developmentally disabled with direct and immediate access to much needed information, support and training material right in their own homes. The projects include a weekly broadcast television series, an information hotline, and a program guide for dissemination of information about the programs. The series is targeted at those who work with, or families of infants, preschoolers and adolescents, as well as mental retardation/developmental disabilities professionals and the general public. The specific objectives are to:

*provide information in rural areas to staff or families to assist in planning for a lifetime of service for their developmentally disabled family member

*to provide information and training to staff and parents in becoming advocates for their children

*to encourage inter-agency coordination of services for people with developmental disabilities.

Both the "On Our Own" and the "Children with Special Needs" series focus on the issues, concerns and questions faced by family members with developmentally disabled infants, preschoolers and adolescents, as they make the transition from home to school, and childhood to the adult world. The show's format combines in-studio discussions with parents and professionals with on-location segments and interviews with prominent professionals in the fields of mental retardation and developmental disabilities such as Dr. Lou Brown, Dr. Lisbeth Vincent, and Dr. T. Berry Brazelton. Topics include Parent/Professional Cooperatioan, Advocacy, Transitions, Aging Out, Shaping Behaviors, The Emotional Impact of Transition on Families, and Siblings, Having a Disabled Child, and Diagnosis. The "On Our Own" series recently received an award for "Best Public Awareness Program" from the President's Committee on the Employment of the Handicapped and the American Association of Disability Communicators and an award from the National Society for Children and Adults with Autism.

Included in the presentation will be a discussion of how the technology is effective and the results of an evaluation process will be shared. Information about the programs will be disseminated and possibilities for making the shows available in areas not currently receiving them on television will be discussed. Participants will be given the opportunity to view one of the shows and offer their reactions as well as ask questions.

General Conference Topical Areas: Early Intervention and Enrichment; Family-Professional Relationships; Independent Living Strategies; Innovative Inservice Training; Innovative Preservice Programs; Lifelong Learning; Technology; Transition Programs.

TRANSITION PROGRAMS

Presentors:
John M. Aiken, Director
Project STEP
SE KS Ed. Service Center
2601 Gabriel
Parsons, KS 67357

Peggy A. Malicoat, Coordinator
Project STEP
SE KS Ed. Service Center
2601 Gabriel
Parsons, KS 67357

Dave DeMoss , Executive Director
SE KS Ed. Service Center
P. O. Box 176
Girard, KS 66743

Workshop Title: Developing Vocational Training Sites in Local Businesses

Three pieces of key legislation-Section 504 of the Rehabilitation Act of 1973, Title II of the Education Amendments of 1976, and Public Law 94-142 (the 1975 Education for All Handicapped Children Act)- have stimulated concern among special educators, vocational educators, and school administrators regarding vocational training options for students with handicaps. Vocational service delivery systems have begun to emerge for school age populations that are moving away form classroom settings to providing vocational programs within the community. Educators however, are ill equiped to deal with the transformation from the classroom to the community because of inadequate or no preparation through professional training activities. As such, the purpose of the workshop will be to introduce procedures that the staff of Secondary Transition Education Program (STEP) utilizes when establishing small group training opportunities for handicapped individuals in local businesses.

Project STEP is a Title VI-B, E.H.A. project and is a service of the Southeast Kansas Education Service Center. Project staff work with educational personnel from rural southeast Kansas, specifically ANW, SEK, and Tri-County Special Education Cooperatives; USD # 234, Fort Scott; and the Special Purpose School of Parsons State Hospital and Training Center. The project is designed to provide technical assistance and training to local educational personnel that will culminate in the development of supported work-study training sites. The sites developed by the project are classrooms per se, however the classes are conducted within the business environment. Each supproted work-study training site provides vocational opportunities for 1-6 students. The sites are termed supported because the educational staff provides all supervision and training of the students. The impetus behind this approach is to provide meaningful age appropriate vocational training for those students who need structured, highly supervised training exxperiences.

The focus of the workshop will be directed toward educators who are involved with transitional services for handicapped learners. The goals are:

Goal 1- To provide educators with a general understanding of employer approaches that will result in positive contacts for establishing community based training opportunities.

Goal 2- To provide educators with a general understanding of selecting appropriate businesses that will accomodate small group training sites.

Goal 3- To provide educators with a general understanding of the Wage and Hour requirements related to training.

Goal 4- To provide educators with a general understanding of employer reservations as they relate to establishing a cooperative training agreement.

Goal 5- To provide educators with a general understanding of critical information that should be discussed during the negotiation process with prospective cooperative businesses.

Goal 6 To provide educators with a general understanding of selecting initial training programs within a cooperative business.

Goal 7 To provide educators with specific procedures for conducting job skill analysis that will result in curriculum training components.

Goal 8 To provide educators with a general understanding of the development of instructional programs.

Goal 9 To provide educators with a general understanding of scheduling and data collection systems.

Goal 10 To provide educators with a general understanding of procedures for training the on-site trainer and supervision of the site.

Goal 11 To provide educators with a general understanding of community site management and physical arrangement of the sites.

CHRISTIAN WORSHIP ASSEMBLY

GIVE UNTO THE LORD the glory due unto his name; worship the Lord in the beauty of holiness...Make a joyful noise unto the Lord. Serve the Lord with gladness. Come before his presence with singing. Psalms 29:2; 100:1-2.

PURPOSE: To Bring Glory and Honor to God Through Active Worship, Discipleship, Evangelism, Mission Involvement and Fellowship in Our Church, Community and World in the Name of Jesus Christ of Nazareth.

CHRISTIAN WORSHIP ASSEMBLY

Spirit-Filled, Interdenominational, Bible Centered, People Oriented

__Sunday, May 22nd, 1988__

Welcome to Christian Worship Assembly! Together let us go and worship Him, the King of Kings and Lord of Lords!

__Tuesday, May 24th__

Deacon/Teachers/Nursery Workers Meeting at 1550 Dranesville Rd. in Herndon. Time: 7:30 pm.

__Wednesday, May 25th__

Join us for a film series entitled 'In His Steps' at 1550 Dranesville Road in Herndon, VA. Time: 7:30 pm.

Monday
May 30th - Memorial Day Picnic
Families please bring your own meat for your family plus by last names please bring:
A-J - Salads/Chips
K-R - Desserts
S-z - Beverages and Ice

__May Birthdays__

May 22nd - Shelley Labban
May 25th - Carl/Melody Scheuerle Anniv.
May 29th - Ron/Julie Phillips Anniv.

Please note: Nursery workers will be in the Nursery from 10 am on during the worship time. Your child ages (1-3) are welcome during this time, if you wish

CHRISTIAN WORSHIP ASSEMBLY

Please Write On Me –

– Order of Service –

__Sunday, May 22nd, 1988__

-- Worship in Song by 'Joy'

-- Nursery for ages 1 week - 3 years. Follow signs to nursery.

-- Children break for Sunday School after Song/Offering Time.

10:30 am -- Sermon by Pastor T. C. Bundy

__Please Use Me For Notes:__

WHAT WE BELIEVE

The program and activities of Christian Worship assembly are based upon and at all times consistent with the following beliefs:

A. The Bible is the mind of Christ, and is the inspired, the only infallible and authoritative Word of God.

B. There is one God manifested in three personalities, Father, Son and Holy Spirit.

C. The reality of Satan and his present control over unregenerate man does exist.

D. Christianity is based upon the following:

1. The diety of our Lord Jesus Christ.
2. His sinless life.
3. His miracles.

His vicarious and atoning death through his shed blood.

5. His bodily resurrection.
6. His ascension to the right hand of the father.
7. His personal return in power and glory as Lord of Lords and King of Kings.
8. The fall of man and his lost estate, which makes necessary a rebirth through confession and belief in the Lord Jesus Christ.
9. The reconciliation of man to God by the substitutionary death and shed blood of our Lord Jesus Christ.
10. The resurrection of believers unto everlasting life and blessing in Heaven, and the resurrection of unbelievers unto everlasting punishment in the torments of Hell.
11. The present supernatural ministry of the Holy Spirit, who bestows the spiritual gifts of: the word of wisdom; the word of knowledge; faith; gifts of healing; working of miracles; prophecy; discerning of spirits; various kinds of tongues; in and among believers on the earth since the day of Pentecost and continuing until our Lord's return.

- **WORSHIP**
  - **MISSIONS**
    - **EVANGELISM**
      - **DISCIPLESHIP**
        - **FELLOWSHIP**

God has given Pastor Bundy a vision for a New Testament Church where freedom of worship is central. He hopes you sense that freedom. 2 Corinthians 3:17 says "where the Spirit of the Lord is, there is Liberty." May each of us experience that freedom of which the Lord refers.

- Worship Services for Adults and Children
- Singles Ministry
- Youth Activities
- Sunday School For Different Ages
- Home Bible Studies
- Fellowship Activities

A Nursery With Adult
Supervision Is Provided

Pastor T.C. Bundy
Phone 437-7747
Christian Worship Assembly

A Spirit Filled, Interdenominational,
Bible Centered, People Oriented Church

(meeting at Hutchinson Elementary School
13209 Parcher Avenue, Herndon)

Office Located at 1550 Dranesville Rd., Herndon, VA

YAI'S "CHILDREN WITH SPECIAL NEEDS" USING TELEVISION TO PROVIDE A COST-EFFECTIVE AND ACCESSIBLE FAMILY SUPPORT SERVICE

AMERICAN COUNCIL ON RURAL SPECIAL EDUCATION
"LINKING PROGRAMS AND RESOURCES FOR RURAL SPECIAL EDUCATION"
ASHEVILLE, NORTH CAROLINA
MARCH 17-21, 1987

PRESENTED BY: MAUREEN LYNCH
PROJECT SPECIALIST
YOUNG ADULT INSTITUTE
460 WEST 34th STREET
NEW YORK, NEW YORK 10001

ABSTRACT

YAI's "Children with Special Needs" is a series of thirty-six half hour television shows produced under a model demonstration grant from the Handicapped Children's Early Education Program, U.S. Department of Education. The shows cover issues of concern to parents and professionals involved with developmentally disabled infants and toddlers. Show topics range from those on emotional issues such as the impact on the family, and dealing with stress, to the more fact-based shows on developmental milestones and Public Law 94-142. Each show focuses on real life issues and concerns which affect families on a daily basis. There is an accompanying training guide which provides additional activities and resources. Dissemination plans include the use of local cable and public television stations, as well as distribution of the shows in videotape format to community agencies. The evaluation plan is discussed and data is given.

BACKGROUND AND RATIONALE

YAI was developed in 1957 by a group of parents concerned about the future of their developmentally disabled adolescents. It has grown to become one of New York State's largest providers of community-based residential, clinical, and support services. Responding to the well-documented need for early and accurate detection of developmentally disabled infants, YAI created a model that would use video to provide information and support. This was based on the following needs:

1) Lack of early detection of infants with developmental disabilities (age 0-3) by families and medical personnel. If a disabling condition is suspected by family members at birth or during early childhood, the first professional consulted is usually a physician. Many physicians, however, lack adequate information about developmental disabilities, preventing them from recommending appropriate providers of early intervention services, thus delaying a coordinated and effective treatment plan.

2) Lack of systematic and consistent early intervention to ensure maximum development of developmentally disabled infants and young children in the areas of intellectual, emotional, physical, mental, social and language development.

3) Lack of parent training and support programs to provide parents with the resources to ensure the maximum growth and development of their disabled child in the home. Obviously, the relationship between parents and their disabled child is a critical factor in the ability of the child to be accepted and viewed as an integral part of the nuclear family unit. The more support a family receives from community social service agencies, the more likely it is that the handicapped child can live at home.

4) Lack of dissemination of proven early intervention techniques among parents and families of developmentally disabled children, especially among economically disadvantaged and minority populations.

5) Lack of parental knowledge regarding diagnostic and evaluation, educational, medical, social and counseling services available for the treatment of developmentally disabled infants and children. State and Federal education laws, (P.L. 94-142; NYS Education Department Regulations of the Commissioner of Education, subchapter P, Part 200), mandate that a written summary of available services be made available to parents, but little is done to ensure that this information is given and explained to parents unless they actively request it.

6) Lack of a consistent source of treatment, support and referral services to families of retarded children in a planning a lifetime of services as the child develops and matures. While the number of programs established to meet the needs of retarded children continues to increase, the practical coordination and ultimate usefulness of these programs to individual recipients seems to be decreasing. This lack of coordination among providers of services to developmentally disabled individuals often results in serious consequences: expensive bureaucratic omission and/or duplication or services, and reinforcement of stereotypical attitudes toward the disabled by attributing lack of progress to the individual rather than to the confusion among service providers.

DEVELOPMENT OF THE VIDEOTAPES

The thirty-six topics of the videotapes were chosen after surveying parents of developmentally disabled youngsters. They were asked what information they would like to have had at the time of their child's birth and/or diagnosis, information they did have at that time that was helpful, and what information they would recommend for new parents. The Project Administrator, who has fifteen years of experience in early childhood and parent training, contacted professionals and asked for their opinions. In addition, an on-going Advisory Board of parents and professionals reacted to the chosen topics. And finally, the Project Coordinator, who is a sibling with twelve years of experience in the special education field, brought her experience as a family member to the process of selecting topics.

Script writing, as well as guest and site selection, was done with the aim of providing the maximum amount of information in the most appealing way possible. Each script was based on two to three instructional objectives to guarantee that essential training material was covered. Guests were chosen whose experiences matched the specific concerns and issues of each show. It was felt to be extremely important to have guests who represented a diverse range of social, economic and family situations. Though the majority of the taping took place in New York City, shows discussed how to get recommended services such as genetic counseling, diagnostic services, or early intervention for those living in rural areas. There is also regular mention of which services are covered by state education departments or health insurance plans. Through the studio segments, hosted by the Associate Executive Director of the agency, there is frank discussion of the need for parent professional cooperation, as well as regular representation of effective cooperation and mutual respect. Professionals who were guests on the shows were chosen for their exemplary work as leaders in such fields as pediatrics, special education, and law. They include Dr. T. Berry Brazelton of Harvard University, Dr. Francis Connor of Columbia University, and Dr. Stanley Greenspan of the Division of Maternal and Child Health. To accomodate their schedules, these and other professionals were interviewed at national conferences such as the Council for Exceptional Children (CEC), The Association for Persons with Severe Handicaps (TASH), The American Association on Mental Deficiency (AAMD), and the National Center for Clinical Infant Programs (NCCIP). Over 150 parents and professionals were interviewed by the Agency Executive Director.

One of the strengths of these videotapes is that they take the viewers--new parents--into worlds where they will have to go and are a bit apprehensive about entering. For instance, in various shows, visits are made to a diagnostic clinic, a genetic counseling session in progress, and a program that teaches techniques for preventing sexual abuse. These can all be very difficult situations. But by having a couple who are parents themselves, act as on-location hosts, the viewer is able to follow them into situations and learn coping techniques and strategies that will allow them to be a more involved, effective parent.

It's been interesting that in the taping of the shows, many parents who are guests will comment afterward about their increased feeling of self-worth. As one mother of a six year old severely disabled daughter said, "It was such a good feeling to be able to help new parents. I feel like I'm always making demands, always trying to get services. For the first time I felt like I was giving something back."

DEVELOPMENT OF THE MANUAL

A training guide accompanies the videotapes. It covers show content, questions frequently asked, resources, and follow-up activities. It is written in a simple and direct style to make it accessible to the widest audience. Though it is assumed that it will be used primarily in parent groups, it can also be used by individuals, parents and staff training.

PURPOSE OF THE PROJECT

1) Transmitting a comprehensive system of parent training and support programs to provide parents with the resources to ensure the maximum growth and development of their developmentally disabled child in the least restrictive environment (i.e. the home). The more supports a family receives from community social agencies the more likely that the disabled child can be

maintained at home.

2) Providing for the effective dissemination of proven, life-enhancing intervention techniques to parents and families of developmentally disabled individuals, especially among economically disadvantaged and minority populations.

3) Enhancing parental knowledge regarding diagnostic and evaluation, educational, medical, social, advocacy and financial services available for their developmentally disabled family member. YAI's "Children with Special Needs" will make it possible for parents to receive the best available information and advice from some of this nation's foremost experts in the field.

4) Alleviating the stress on parents, siblings, and other family members of disabled individuals by the provision of information, referral, and direct services.

5) Offering a reliable, coordinated source of support, treatment, and referral services to families of developmentally disabled individuals. YAI's "Children with Special Needs" has the capacity to provide a single point of entry into the service system for families of people with developmental disabilities.

6) Provide parents with accurate information about normal growth and development in infants and young children, thus enabling them to detect suspected deviations from normal growth patterns of development in their young children.

DISSEMINATION

YAI's "Children with Special Needs" is being broadcast on WNYE, New York City's Board of Education operated public television station. A one-year commitment of three weekly airings was given -- Sunday morning, Monday during the day at a designated teacher in-service time slot, and Tuesday evening. Efforts are being made to secure air time on public television and cable stations across the country.

The model has been presented to professionals at conferences such as those sponsored by CEC, TASH, AAMD, and NCCIP. Conference participants view a show, and are told about opportunities for access to the series.

In addition, though we are still in the process of producing the final shows, screenings by parent groups have been arranged. Their reactions have served as a field testing that has been extremely valuable.

EVALUATIONS AND CONCLUSIONS

Evaluation forms were developed to determine if parents felt "Children with Special Needs" was informative, and would help them be a more involved parent. The results are shown in Table A. It is interesting to note that a full 100% said they would recommend the show to others. In addition, evaluations were completed by professionals and Advisory Board members. In conclusion, it is encouraging to see the tremendous response from families who feel that for the first time their concerns are being acknowledged on television. A sense of parent empowerment, and parent professional cooperation is carried throughout the thirty-six videotapes and the training guide. The increasing use of VCR's has made staff of community agencies interested in using the videotape format of "Children with Special Needs" to better assist the parents and young children with whom they work.

SUMMARY OF EVALUATIONS

APPENDIX A

% OF PARENT RESPONSES

	Strongly agree	Agree	Somewhat agree	Disagree	Strongly di
1. This show was informative.	56%	44%	0%	0%	0%
2. What I learned was important to me.	38%	56%	6%	0%	0%
3. The materials in the show were easy for me to understand.	69%	31%	0%	0%	0%
4. The speakers were knowledgeable about their subject areas.	81%	19%	0%	0%	0%
5. The show provided me with new information or resources to help my child and family.	21%	29%	21%	29%	0%
6. I feel more effective in advocating for my child and family.	23%	38%	8%	31%	0%
7. I would recommend this show to others:					
a.__ parents/families	100%	0%	0%	0%	0%
b.__ professionals	93%	7%	0%	0%	0%
c.__ friends/neighbors	75%	12%	0%	13%	0%

8. Would you recommend this show to other parents?

__100%__ yes __0%__ no

9. Overall Rating

__82%__ Excellent __18%__ Good __0%__ Fair __0%__ Poor

Parents who disagreed with statements #5 and 6 tended to be parents of older developmentally disabled children who have already sought out community resources and become effective advocates for their children. Overall, the series has been highly rated by parents and they have clearly and unanimously recommended that "Children with Special Needs" be ,ade available to other parents on a larger scale.

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Gary Glasenapp
Teaching Research
345 N. Monmouth Ave.
Monmouth, OR 97361

A Data Based Model for the Rural Model Aide in Special Education

For the past ten years Teaching Research has been a key provider of training to paraprofessionals/aides in the State of Oregon and numerous other states. This training provided to paraprofessionals or educational aides has proven to be uniquely suited to the needs of such personnel working in the various roles they assume within a rural based state like Oregon. The role of the paraprofessional appears to vary within and between states. Some work in traditional classroom aide roles with a certified teacher in one classroom. Others have a more independent responsibility as rural model aides where they work under the supervision of a certified teacher but have major responsibility for implementing assessment, programming and evaluation activities. Still others function as home trainers or parent/family trainers.

Teaching Research has developed both the content and the training procedures to develop basic skill level for paraprofessionals regardless of their particular role assignment. The content of the training is based on the Teaching Research Data Based Classroom Model which received national validation through the Joint Dissemination and Review Panel as an exemplary educational model. This model is designed to meet the needs of educators serving moderately and severely handicapped students and has been replicated by over 1,500 educators across the U.S., in Canada and Australia. The Data Based Classroom Model offers a proven means for the rural aide to assess student's needs, develop appropriate programs and to evaluate student progress. The Teaching Research Placement Test and other supplemental instruments have been developed to identify deficit skills in the major domains of language/communication, cognitive, self-help, gross and fine motor, socialization and transition skills.

Based on the various assessment tools, individual and group programs are established utilizing a "clipboard" format. The clipboard contains all the information necessary to conduct the program such as the verbal or nonverbal cue, materials, the correction procedure to be used for incorrect responses and the reinforcers used for correct responses, the criterion for advancement through the program, plus the data sheet to collect student skill acquisition information.

The Teaching Research Curricular Guides serve as a comprehensive collection of task analyzed sequences covering the major skill domains as well as providing teaching suggestions, suggested materials and other information about each domain and their subskills.

Student progress is constantly monitored and evaluated through a comprehensive data collection and updating system. Program decisions based on precise data collected by the staff or volunteers are made on a daily basis to maximize student progress.

The training procedures are drawn from the Teaching Research Training Model which received national validation through the Joint Dissemination and Review Panel in 1979 and again in 1985. The training model is comprehensive and incorporates many documented inservice training best practices. These include 1) objective based training with measurable outcomes; 2) training in a demonstration classroom; 3) practicum based training which allows hands-on-experience utilizing new techniques and strategies; 4) immediate feedback on performance of skills and knowledge; 5) the use of role play, video tape and other audio-visual techniques plus discussions/seminars; 6) post-training follow-up to participant's site.

The five day training session is available at the main training site in Monmouth, Oregon and is also available at a number of satellite training sites located in Alaska, Arizona, California, Alberta-Canada, Connecticut, Indiana, Iowa, New Mexico and Utah.

HANDOUT

OBJECTIVES FOR TRAINEES
TEACHING RESEARCH INFANT AND CHILD CENTER

OBJECTIVE	ACTIVITY	EVALUATION
1. Trainee will define 22 behavioral terms used at Teaching Research Infant and Child Center. Trainee will answer three questions concerning behavior problems.	1.1 Take a pre- posttest on the following terms: Baseline Behavior Behavioral Objectives Consequences Criterion Cue Positive Reinforcement Posttest Prescriptive Program Placement Test Primary Reinforcers Probe Punisher Reverse Chaining Self Reinforcement Shaping Social Reinforcement Time out Token Economy Aggressive Behavior Non-compliant Behavior Self-indulgent Behavior	1.1.1 Trainee will score 23 or 92% correct. If this score is met at pretest, the posttest is not required.
2. Trainee will answer 5 questions over Teaching Research reading materials.	2.1 5 questions over reading material.	2.1.1 Trainee will score 13 or 85% correct given as study questions during week.
3. Trainee will be able to conduct prescriptive programs in the areas of self-help, motor development and language.	3.1 Conduct prescriptive programs with a handicapped child in an individual instructional setting in the curricular areas of self-help, motor development and language.	3.1.1 Trainee will score 90% appropriate delivery of cues, consequences and accuracy in recording data in any one curricular area on the Teaching Research Volunteer Observation Form.

OBJECTIVE	ACTIVITY	EVALUATION
4. Trainee will be able to modify or update existing prescriptive programs based on data collected during teaching session.	4.1 Participate in three updating sessions with staff.	
	4.2 Updating exercise: given 6 academic programs, complete with cover sheet, task analysis and data, update for next day.	4.1.1 & 4.2.1 Trainee will score 5 or 83% correct on the updating exercise.
5. Trainee will demonstrate the ability to administer a placement test utilizing the Teaching Research Infant and Child Center Curriculum and establish programs for a child.	5.1 Trainee will administer a placement test to a handicapped child in at least two curriculum areas.	5.1.1 Trainee will conduct a placement test completing 4 or 80% of items listed on TR placement test checklist correctly.
	5.2 Trainee will identify at least two programs appropriate for that child based on placement test data.	5.2.1 Trainee will correctly identify 2 or 100% of programs appropriate
	5.3 Trainee will develop a clipboard for that child to include: cover sheet, consequence file, language file, program cover sheet and data sheet.	5.3.1 Trainee will establish a clipboard to include 80% of the 27 indicated items, completed appropriately.
6. The trainee will pinpoint an inappropriate behavior exhibited by a handicapped child, gather baseline on that behavior and design a program to alter the specified behavior.	6.1 Conduct existing behavior programs in a group setting.	6.1.1 Participation in the aide role as described in objective #6.
	6.2 Observe a group setting and pinpoint an inappropriate behavior in measurable terms and take baseline sample of the behavior.	6.2.1 & 6.3.1 Trainee will establish a behavior intervention program to include 8 or 80% of the necessary items, completed appropriately.
	6.3 Design a treatment to remediate the pinpointed behavior, to include a definition, terminal objective, method of measurement, baseline program, treatment program and data system.	

OBJECTIVE	ACTIVITY	EVALUATION
7. The trainee will demonstrate the ability to manage groups of children engaged in free-time or seatwork activities.	7.1 Manage a group of children at the activity area.	7.1.1 Trainee will score 85% appropriate delivery of cues and consequences on the Teaching Research Aide Observation Form.
	7.2 Conduct one behavior intervention program and record data while managing a group of children.	7.2.1 Trainee will utilize specified treatment and appropriately record data as judged by trainer.
	7.3 Conduct a stimulation program while managing a group of children, presenting stimulus item and recording child response.	7.3.1 Trainee will score 80% appropriate presentation of the stimulus and recording of responses on the Teaching Research Stimulation Checklist.
8. The trainee will demonstrate the ability to utilize the Teaching Research Observation Forms.	8.1 Observe other trainees or staff in volunteer role.	8.1.1 Completion of 2 10-minute observations of volunteer performance with 85% agreement between the trainee and the trainer as to appropriate delivery of cues, consequences and data recording.
	8.2 Observe other trainees or staff in aide role.	8.2.1 Participation in group exposure session with aide form.
9. The trainee will demonstrate the ability to manage the classroom in the role of the teacher.	9.1 Trainee will manage the classroom to include interacting with volunteers and staff, modeling programs, utilization of observation forms to evaluate volunteers and aide and general administration of class.	9.1.1 Trainee will when in the role of teacher, perform 6 of the described activities appropriately, as judged by the trainer, and complete 80% of items on the Teacher's Checklist on the Teaching Research Teacher Observation Form.

Revised
1/87

HANDOUT

TRAINING SCHEDULE
TEACHING RESEARCH INFANT AND CHILD CENTER
(PS/Elem)

Monday

8:30 - 10:00	Orientation for Training Week
10:00 - 11:30	Observe Demonstration Classroom (TR staff modeling classroom roles)
11:30 - 12:00	Discussion of Classroom Behaviors/Rules of Thumb/Think Sheets
12:00 - 1:00	Lunch
1:00 - 1:30	Learning Theory Discussion
1:30 - 2:00	Clipboard Lecture
2:00 - 2:15	Break
2:15 - 3:15	Curriculum/Task Analysis Lecture
3:15 - 3:30	Review Classroom Observations
3:15 - 4:00	(Elem.only) Role Play Classroom Roles
3:30 - 4:30	Prepare for Roles
4:00 - 4:30	(Elem.only) Prepare for Roles

ASSIGNMENTS FOR TUESDAY

Complete:

Training Manual
Section F-1-5 Placement Testing Review
Curriculum Guide
Chapter 2 Placement Testing
Data Analysis Packet
Pages 1-26
Study Questions #1 & 2 - Training Manual Section B 8 & 9

Lowest Priorities:

Training Manual
Section B-1-5 Classroom Procedures
A Data Based Classroom
Chapter 3 Classroom Organization and Management

Tuesday

	8:00 - 8:45	Review Placement Procedures
	8:45 - 9:00	Prepare for Placement Test
	9:00 - 10:00	Placement Test Practicum
	10:00 - 10:15	Break
	10:15 - 12:00	Assume Assigned Roles
(Elem. only)	10:00 - 10:30	Assume Assigned Roles
	10:30 - 10:45	Break
	10:45 - 12:00	Assume Assigned Roles
	12:00 - 1:00	Lunch
	1:00 - 3:00	Lecture - Data Collection/Data Analysis Role Play
	3:00 - 4:30	Prepare for Roles/Review Assignments
(Elem. only)	3:00 - 3:45	Volunteer Observation Form (Role Play)/Aide Observation Form
	3:45 - 4:30	Prepare for Roles/Review Assignments

ASSIGNMENTS FOR WEDNESDAY

Complete:
Training Manual
  Clipboard Exercise Section D 19-25
  Review Behavior Treatment Paper
  Study Question #3, Section F7
Data Analysis Packet
  Pages 27-52

Lowest Priority:
A Data Based Classroom
  Chapter 9-Use of Support Service in Program Planning Procedures
Little People
  Introduction and Chapter 2

Wednesday

8:00 - 9:00	Behavior I Lecture
9:00 - 9:15	Pinpoint Behaviors
9:15 - 9:30	Prepare for Roles
9:30 - 10:30	Assume Assigned Roles
10:30 - 10:45	Break
10:45 - 12:00	Assume Assigned Roles
12:00 - 1:00	Lunch
1:00 - 2:30	Behavior II Lecture
2:30 - 4:30	Update Classroom Clipboards/Review Assignments/Prepare for Roles

ASSIGNMENTS FOR THURSDAY

Complete:
Data Analysis Packet
  Pages 52-110
Training Manual
  Updating Exercise Section G 11-30
  Behavior Intervention Exercise Section H 51-58
  Study Question #4 Section H59

Thursday

	8:00 - 8:15	Prepare for Roles
(Elem. only)	8:30 - 9:00	Prepare for Roles
	8:15 - 9:30	Assume Assigned Roles
(Elem. only)	9:00 - 10:30	Assume Assigned Roles
	10:30 - 10:45	Break
	10:45 - 12:00	Assume Assigned Roles
	9:30 - 9:45	Break
	9:45 - 10:30	Volunteer Observation Form (Role Play)/Aide Observation Form
	10:30 - 12:00	Assume Assigned Roles
	12:00 - 1:00	Lunch
	1:00 - 2:15	Parent Training Lecture
	2:15 - 2:45	Discussion and Group Break
	2:45 - 4:15	Update Classroom Clipboards/Review Assignments/Prepare for Roles

ASSIGNMENTS FOR FRIDAY

Complete:
Training Manual
Study Question #5 Section 1 17
Data Analysis Packet
Pages 111-128
Data Based Classroom
Chapter 10 Parent Involvement

Friday

	8:15 - 8:30	Prepare for Roles
Elem. only	8:30 - 9:00	Prepare for Roles
	9:00 - 10:30	Assume Assigned Roles
	8:30 - 10:00	Assume Assigned Roles
	10:00 - 10:30	Tour Center
	10:30 - 11:30 (lunch provided)	Working Lunch - Complete Assignments, Posttest, Review Objectives, Meanwhile Packet, Discussion of Follow-up Procedures
	11:30 - 12:00	Third Party Evaluation

[illegible]

Teaching Research Placement Test: Number Concepts Skills

	Program and Suggested Cue	Placement Test				Baseline		Posttest		Comments
		Trial	Data	Yes/No	Date	Data	Date	Data	Date	
	NUMBER CONCEPTS		▨							
A	Rote counts 1-25 - "count from 1-25"		▨							
B	Counts 1-25 objects - "count the (blocks)"		▨							
C	Gives specified number of objects 1-10									
	1. "give me 2 (blocks)"		▨							
	2. "give me 5 (blocks)"		▨							
	3. "give me 7 (blocks)"		▨							
D	Matches groups of equal numbers									
	1. "match the cards with the same number of objects"(3)		▨							
27	2. "match the cards with the same number of objects"(8)		▨							
	3. "match the cards with the same number of objects"(10)		▨							
E	Finds groups with more or less or same									
	1. "show me the card that has more (dogs)"		▨							
	2. "show me the card that has the same number of (dogs)"		▨							
	3. "show me the card that has less (dogs)"		▨							
F	Matches numerals 1-25									
	1. "match 9 to 9"		▨							
	2. "match 12 to 12"		▨							
	3. "match 18 to 18"		▨						76	
	75		▨							

Teaching Research Placement Test: Number Concepts Skills

	Program and Suggested Cue	Placement Test					Baseline		Posttest		Comments
		Trial		Data	Yes/No	Date	Data	Date	Data	Date	
	NUMBER CONCEPTS, continued										
G	Finds numerals 1-25										
	1. "find the number 6"			▨							
	2. "find the number 13"			▨							
	3. "find the number 22"			▨							
H	Verbalizes names of numerals 1-25										
	1. "what number is this?" (11)			▨							
	2. "what number is this?" (14)			▨							
J29	3. "what number is this?" (24)			▨							
I	Knows equivalence of objects to numerals 1-10										
	1. "give me the same number of objects that are on this card" (4)			▨							
	2. "give me the same number of objects that are on this card" (7)			▨							
	3. "give me the same number of objects that are on this card" (10)			▨							
J	Identifies numerals that come before, after or in between										
	1. "what number comes before 3?"			▨							
	2. "what number comes after 8?"			▨							
	3. "what number comes in between 5 and 7?"			▨							
K	Adds with objects 1-10										
	1. "add the objects 1 plus 4"			▨							
	2. "add [illegible] objects 5 plus 2"			▨							

Teaching Research Placement Test: Number Concepts Skills

	Program and Suggested Cue	Placement Test					Baseline		Posttest		Comments
		Trial Data			Yes/No	Date	Data	Date	Data	Date	
	NUMBER CONCEPTS, continued										
K	Adds with objects 1-10 continued										
	3. "add the objects 4 plus 6"			▨							
L	Adds numbers 1-10										
	1. "add the numbers 0 plus 6"			▨							
	2. "add the numbers 3 plus 4"			▨							
	3. "add the numbers 5 plus 4"			▨							
M	Counts backwards from 10 - "count backwards from 10"			▨							
N	Subtracts objects 1-10										
	1. "subtract the objects 10 minus 8"			▨							
	2. "subtract the objects 7 minus 3"			▨							
	3. "subtract the objects 9 minus 4"			▨							
O	Subtracts numbers 1-10										
	1. "subtract the numbers 8 minus 7"			▨							
	2. "subtract the numbers 5 minus 1"			▨							
	3. "subtract the numbers 9 minus 6"			▨							
				▨							
				▨							
				▨							
				▨							

HANDOUT

COMMUNICATION PLACEMENT ASSESSMENT
For Younger and Severely Handicapped
Teaching Research Integration Project

CODES
X = Consistently demonstrates the skill
X/O = Inconsistently demonstrates the skill
O = Does not display the skill

Student's Name: ____________________
B.D.: ____________________ Age: __________
Person Administering Test: ____________________

Date of 1st Assessment: __________
Date of 2nd Assessment: __________
Date of 3rd Assessment: __________

AREA I: RESPONSES TO SENSORY/SOCIAL INPUT Behaviors	Age Appropriate Examples/Context Younger	 Older Severely/Profound Handicapped	Dates			Comments/ Examples	Comments/ Examples
1. Looks at (fixates on) a familiar person who is gesturing and/or talking (1 mo.)	Looks at Mother, Dad, , Siblings	Looks at caregiver or teacher					
2. Looks at (fixates on) an interesting object (8-12" away) (1 mo.)	Looks at rattle, mobile, stuffed toy in supine position	Looks at food or spoon when in a standing or sitting position					
*3. Quiets or startles when noise is presented (1 mo.)	Door slammed, object dropped (not a familiar noise). Hearing assessment should be completed						
4. Turns or quiets to person-to-person contact (2 mo.)	Mother touches while crying, child quiets	Calms to touch; smiles to touch					
5. Responds by smiling, quieting, grimacing to taste/smell (0-2 mo.)	When given bottle or nursed	When fed during mealtime or motivating activity					
6. Responds by smiling or quieting when hearing a familiar voice (0-2 mo.) (Prerequisite for #13)	Mother talks to child outside of child's immediate range of vision	Caregiver or teacher talks to student outside of child's immediate range of vision					
*7. Increases/decreases activity level on seeing an interesting object (2 mo.)	Bottle is presented (8-12" away)	Older student's responses may not be highly visible					
8. Tracks interesting objects (that do not make sound) that are moved from side to side (2 mo.)	Objects that do not make noise, i.e. bright yarn, ball, mirror	Spoon with food, caregiver					
9. Visually searches for sound - side to side (2 mo.)	Mother's voice, unfamiliar sound	Familiar voice, unfamiliar sound					
10. Responds in different ways to firm and pleasant voices	Playful voice Firm, louder voice	Pleasant voice, laughing "No, stop"					
11. Responds in a specific way to a person, sound or object in a familiar routine or activity	Quiets or opens mouth seeing bottle	Opens mouth to spoon Quiets upon seeing spoon or cup					

*Behaviors may not be appropriate for older students.

AREA 1: RESPONSE TO SENSORY/SOCIAL INPUT (Continued) Behaviors	Age Appropriate Examples/Context		Dates			Comments/ Examples	Comments/ Examples
	Younger	Older Severely/Profound Handicapped					
12. Looks back and forth between two interesting objects (2-3 mo.)	Two objects (toys) that do not make noise, i.e. doll and mobile	Spoon with food, cup, leisure objects					
13. Turns head when unfamiliar sound or a familiar voice is presented and locates sound (4-5 mo.)	Lying down or in a carrier	Turns to telephone ringing or door closing in a standing or sitting position					
14. Participates (does not resist) in a familiar movement when guided through a movement (4 mo.)	Patti-cake, bye-bye, so big, or a motivating activity	Movement with eating, self-help, or motivating activities					
*15. Smiles at a familiar person who is interacting with him/her (4 mo.)	Familiar person kissing or playing with child	During motivational activities with a familiar person					
16. Continues a familiar movement when assisted. Contact is maintained without helping the student complete the movement (3-6 mo.)	Playing patti-cake, waving bye-bye, pushing toy	Opening door, getting paper towel, turning water faucet					
17. Responds in at least two different ways when the adult interacts with the student (4-6 mo.)	Looks at, smiles, reaches, increase activity	Looks at, laughs, pushes away, reaches					
18. Tries to get attention through eye contact, smiling, vocalizing (5-6 mo.)	Tester should interact with student, then look away to test this skill						
19. Begins actions and continues that action when it is imitated by the adult (8 mo.)	Clapping, waving, pounding, lifing arms	Washing hands, rubbing hands, cutting with knife					
20. Imitates actions modeled by an adult. Student can see his own actions. Student can already do these actions independently (6-9 mo.)	Clapping, waving, patting	Washing hands, stirring, turning, cutting					
21. Anticipates and demonstrates the next action in a series of actions in a routine activity (6-9 mo.)	Holds out leg or arm in dressing	Reaches to pull up pants after bathroom. Reaches for a spoon after given a bowl					
22. Imitates new actions. Student can see his own actions. These are actions that the student cannot do independently.	Waving, patting (child can see his own action)	Pouring, turning knob, opening jar					
23. Imitates new actions that the student cannot see himself perform	Peek-a-boo, shaking head, point to nose	Nodding, kleenex to nose, combing hair without mirror					

HANDOUT

SOCIAL INTERACTION ASSESSMENT
Teaching Research Integration Project

Student's Name: ______________________

B.D.: ______________ Age: ______________

Person Administering Test: ______________

Date of 1st Assessment: ________ Score ____

Date of 2nd Assessment: ________ Score ____

Date of 3rd Assessment: ________ Score ____

I. SOCIAL INTERACTION SKILLS WITH PEERS	Age Appropriate Examples/Context		Dates			
Behaviors	Younger	Older Profoundly Handicapped				Comments
1. Remains in proximity to a peer in a reinforcing activity.	Child/student does not leave area when peer approaches (snack, meals)					
2. Accepts reinforcer from the peer.	Toy or edible	Edible, money, reinforcing object				
3. Approaches the peer when peer has a reinforcing object.	Peer has a toy	Peer has a coke				
4. Accepts touch from the peer as a reinforcer or as the peer assists.	Peer assists in "helping" during play	Peer assists getting lunch ticket				
5. Looks at the peer when the peer approaches.	Peer approaches to push wheelchair	Peer approaches to go on outing				
6. Looks at the peer when the peer calls the student's name.						
7. Observes the peer in a motivational activity.	Looks at peer pouring juice	Looks at peer during lunch activity				
8. Gives an object to the peer when an adult requests.	Gives Johnny the book	Give Mark your money				
9. Responds to the peer's directives when they are paired with gestures.	Come, give me, no, here, etc.	Stop, pick up, put				
10. Demonstrates recognition of familiar/non-familiar peers.	Smiles at or approaches familiar peers					
11. Accepts an object from the peer (object is not a primary reinforcer).	- toy	- cup				
12. Observes the peer activating a new or unfamiliar object.	A mechanical toy	Putting money in the pop machine				
13. Responds positively to interaction with the peer by smiling.	While peer activates a toy or comm. device	While playing Simon				
14. Cooperates in some way with peer when the activity is peer initiated.	Pulls string for "See & Say" as peer holds it	Stirs as peer holds bowl				
15. Responds nonverbally to a greeting from peer.	Waves	Smiles/waves				
16. Looks at an object or person when the peer points to the object or person.	Points to the playground	Points to the door				
17. Initiates smiling at the peer.	Smiles at peer playing and talking	Smiles at peer as peer gives lunch ticket				

I. SOCIAL INTERACTION SKILLS WITH PEERS Behaviors	Age Appropriate Examples/Context Younger	 Older Profoundly Handicapped	Dates			Comments
18. Takes turns activating an object with an adult monitoring.	Jumping on small trampoline	Activating Simon				
19. Imitates peer's model for a non-language task.	Claps hands	Giving money to store clerk				
20. Initiates getting a peer involved in cooperative activity.	Puts ball next to peer and sits on floor	Puts Simon in front of peer				
21. Shares with the peer.	Offers peer a cracker	Gives peer part of cake				
22. Responds to verbal/sign directives from the peer (no gestures are given).	"Get your coat"	"Open the door"				
23. Responds non-verbally to questions from the peer.	"Where is Sue?" - student looks	"What do you need?" - student gets money				
24. Initiates helping the peer.	Holds bowl while peer stirs	Holds peer's coat while peer ties shoes				
25. Attends to the peer signing, talking, or using a communication board.	Watches peer sign "Get the apple"	Watches peer using communication board				
Responds to the peer's communication with a prelanguage response by:	"What do you want?" ________	"What do you want?" ________				
26. assisting the peer	Pushes peer's hand toward milk	Guides peer to coat				
27. touching the peer or an object	Looks at peer, touches plate	Looks at peer, touches game to play				
28. extending an object to the peer	Extends container to be opened	Extends cup for more coffee				
29. extending his/her hand toward the peer to request an object	Extends hand for lotion	Extends hand for glasses				
30. gesturing	"Who's coat is this?" - gestures mine	"Are you finished?" - nods "yes"				
31. pointing to an object or location to request "get it/let's go"	"Where should we go?" - points to outside	"Where should we go?" - points to sink				
32. offering an object to a peer to get the peer to act	"What do you have?" - shows picture	"Where are your glasses? - shows				
33. Imitates the peer's language (verbal sign/communication board).	Says "Go"	Signs, "finish"				
34. Initiates communication with a peer to protest the peer's actions by pushing away/frowning/vocalizing/gesturing (prelanguage)	Peer takes toy, student vocalizes	Peer reaches for coat, student pushes away				
Initiates communication with a peer to request by: (prelanguage)						
35. assisting the peer to help	Pushes peer's hand toward toy	Pushes peer's hand to get "more" money				

I. SOCIAL INTERACTION SKILLS WITH PEERS	Age Appropriate Examples/Context		Dates			
Behaviors	Younger	Older Profoundly Handicapped				Comments
36. touching object/looks at the peer	Touches cracker box - looks at peer	Touches vending machine				
37. extending objects to get the peer to act on them	Hands cup to peer for "more" milk	Hands empty can to peer to put away				
38. extending hand to get the peer to give something	Extends hand to get cup	Extends hand to get spoon				
39. pointing to indicate desired object	Points to the ball	Points to the organ/ video game				
40. using gestures to request	Gestures "mine"	Gestures "I don't know?"				
41. greeting peer						
Initiates communication to get attention (prelanguage):						
42. tapping/tugging/using an attention getting device	Tugs at peer to come	Taps peer to get attention				
43. pointing	Points to teacher to get peer to look	Points to school bus				
44. showing (getting peer to attend to object or get confirmation)	Shows toy to peer	Shows new watch to peer				
45. Responds to the peer with a language response (sign, verbal).	"What do you need?" - signs, "paper"	"Where are we going?" - points to "store" on communication board				
46. Responds to Yes/No questions with a language response.	Do you want this? says "No"					
47. Initiates communication with the peer using a language behavior (verbal, sign, communication board).	Says, "No"	Signs, "Help"				
48. Uses the peer's name to get peer's attention.	Says, "Johnny"	Signs, "Mark"				
49. Points out the peer's actions to another person (prelanguage or language).						
50. Shows the peer how to do something.	Shows peer how to turn on a toy	Shows peer where the sugar is kept				
51. Requests an answer from a peer.	Says "go" as in "Where are you going?"	Points to a new person with question, facial gesture				

II. APPROPRIATE BEHAVIORS IN SOCIAL CONTEXTS	Age Appropriate Examples/Context		Dates			
Behaviors	Younger	Older Profoundly Handicapped				Comments
Student is socially appropriate by not engaging in behaviors injurious to others:						
1. hitting						
2. kicking						
3. pulling hair						
4. pinching						
5. spitting						
6. Student is socially appropriate by not engaging in self-destructive behaviors.						
7. Student is socially appropriate by not throwing objects/destroying objects.						
8. Student is socially appropriate by not publically engaging in socially unaccepted behaviors (masturbation, taking down pants).						
9. Student is socially appropriate by not demonstrating inappropriate vocalizations.						
10. Student is socially appropriate by not demonstrating self-stimulation behaviors and drawing negative attention to himself.						
11. Student is socially appropriate by not touching other students inappropriately.						
12. Student is socially appropriate by not engaging in inappropriate behavior to gain attention (laughing at nothing, spilling things, etc.).						

HANDOUT

Project ENTRANS
Transition Skills Assessment I

Child's Name ______________________ Recorder ______________________

School/Class ______________________ Recording Code:

No = 0
Inconsistent = 1
Yes = 2

Dates	Pre								Post	Comments
CLASSROOM RULES										
1. Follows established class rules.										
2. Moves through routine transitions smoothly.										
3. Walks rather than runs when indoors.										
4. Controls voice in classroom.										
5. Can "line-up" and stay in line.										
6. Raises hand to get teacher's attention.										
7. Waits appropriately for teacher response to signal (raised hand).										
8. Helps with clean-up of a group activity when given a direction by an adult to assist with clean-up.										
9. Replaces materials and cleans up own workspace.										
10. Stays in "own space" for activity.										
ORKSKILLS										
Refrains from disturbing or disrupting the activities of others.										
2. Displays appropriate levels of independence, e.g., does not need excessive amounts of supervision to complete simple tasks.										
3. Produces work of acceptable quality given her/his skill level.										
4. Asks questions for information about assigned tasks when did not understand initial instructions.										
5. Follows a three part direction related to task.										
6. Works independently on a developmentally appropriate activity assigned by an adult.										
7. Finds materials needed for task.										
8. Selects and works on a table activity independently.										
9. Recognizes completion of a task, indicates to adult that he/she is finished and stops activity.										
10. Works on assigned task for 15 minutes.										
11. Self-corrects errors.										
12. Incorporates aquired skill(s) in new task.										
13. Uses classroom equipment independently, e.g. pencil sharpener, language master.										
Uses crayons and scissors appropriately without being destructive.										
15. Imitates other children's appropriate behavior.										
SELF-MANAGEMENT										
1. Monitors appearance, e.g. keeps nose clean, adjusts clothing, uses napkin.										

Transition Skills Assessment I, continued

ld's Name ______________________

Dates	Pre								Post	Comments
SELF-MANAGEMENT continued										
2. Uses a public restroom with minimal assistance in the school, a store, or a restaurant.										
3. Comes to an adult, when called or signaled by a bell or whistle, and lines up.										
4. Will put on/take off outer clothing within a reasonable amount of time.										
5. Eats lunch or snack with minimal assistance.										
6. Comes into the classroom or house independently from the bus or car.										
7. Goes from classroom to bus or car independently.										
8. Knows way around school and playground.										
9. Responds appropriately to fire drills.										
10. Seeks out adult for aid if hurt on the playground or cannot handle a social situation, e.g., fighting.										
11. Follows school rules (outside classroom).										
12. Stays with a group when outdoors according to established school routine.										
Aware of obvious dangers and avoids them.										
Discriminates between edible and inedible toys and objects.										
COMMUNICATION										
1. Comes to an adult when called.										
2. Listens to and follows three-part directions given to a group.										
3. Communicates own needs and preferences (food, drink, bathroom).										
4. Refrains from asking irrelevant questions which serve no functional purpose or are not task related.										
5. Stops an activity when given a direction by an adult to stop.										
6. Attends to peer who is speaking to large group.										
7. Answers questions about self and family (personal information).										
8. Responds appropriately when comments are directed to him/her.										
9. Relates experiences and ideas to others.										
SOCIAL BEHAVIORS										
1. Uses social conventions: greetings, please and thank you, excuse me.										
2. Complies with teacher directions.										
Separates from parents and accepts school personnel.										
4. Follows specified rules of games and/or class activities.										

Transition Skills Assessment I, continued

ild's Name ______________________________

Dates	Pre								Post	Comments
SOCIAL BEHAVIORS continued										
5. Makes choices between preferred items or activities.										
6. Initiates interaction with peers and adults.										
7. Plays cooperatively.										
8. Respects others and their property.										
9. Defends self.										
10. Expresses emotions and feelings appropriately.										
11. Responds positively to social recognition and reinforcement.										
12. Interacts appropriately at a snack or lunch table.										
13. Expresses affection toward other children and adults in an appropriate manner, e.g., is not overly affectionate by hugging, kissing, touching.										
14. Uses appropriate degree of cooperation with other children in order to get his/her way, e.g., is not overly manipulative.										
15. Refrains from self-abusive behavior, e.g., biting, bruising self, head banging.										
Refrains from physically aggressive behavior toward others, e.g., hitting, biting, shoving.										
17. Uses language which is not obscene.										
18. Uses outdoor equipment in a developmentally appropriate manner during unstructured activities with limited (1:30) adult supervision.										

Teaching Research
Monmouth, OR 97361

HANDOUT

Name

SAMPLE CLIPBOARD

Teaching Research Infant and Child Center

Weekly Cover Sheet

Name Robert

Program	M	T	W	TH	F
1. Four Piece Non-Interlocking Puzzle	KU	TP		○	
2. Puts on Jacket	SS	LD	KU		
3. Washes Hands	SS	RS	JP		
4. Produces Cross	TW	DC	CB		
5. Draws Vertical Line	TW	RS	DC		
6. Find Colors	KU	DC	JP		
7.					
8.					
9.					
10.					

Please Note:

TEACHING RESEARCH INFANT AND CHILD CENTER

Language File, Consequence File, and General Comments

Child's Name: Robert

Reinforcement File

PRIMARY/TANGIBLE:

1. Vibrator - likes to be tickled on tummy.
2. Music box
3. Cookies
4. Juice
5. Candy
6. Balloon - likes to throw in air
7. Stars on paper for writing program

←Pair→

SOCIAL: (Examples)

1. That's right!
2. Good (name task)
3. Wow!
4. Good for you!
5. Lift in the air

Receptive Language

1. Understands simple one-concept commands

Expressive Language

1. Says most speech sounds
2. Will imitate words by giving initial sound
3. Be sure Robert says the initial sound when repeating a word - he can do it.

General Comments

1. Make sure Robert is attending to task before giving cue.
2. If he is not attending to task, use time out for a period of 30 seconds to one minute, then resume task.

Approximate Age for
Skill Acquisition
2½-3 years

F. Four Piece Non-Interlocking Puzzle

Terminal Objective: Student puts in four puzzle pieces.

Prerequisite Skills: Ability to grasp and release objects.

Phase I	Student puts in #1 puzzle piece with all other pieces in place.
Phase II	Student puts in #1 and #2 puzzle pieces with both other pieces in place.
Phase III	Student puts in #1, #2 and #3 puzzle pieces with other puzzle piece in place.
Phase IV	Student puts in all four puzzle pieces.

The following steps apply to Phases II-IV only.

Steps:

1. Teacher hands puzzle pieces to student in number order (#1 first, #2 second, etc) one at a time.
2. Puzzle pieces are handed to student in random order, one at a time.
3. Puzzle pieces are randomly arranged on the table.

Suggested Materials: Non-interlocking four-piece puzzle. (These are available with large or small knobs for physically limited children.)

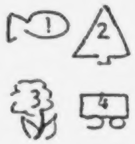
Teaching Notes:

1. Teaching Sequence - Teach this skill beginning with Phase I. Then teach Phase II, steps 1-3 before teaching Phase III, steps 1-3. Continue to teach Phase IV in the same manner.

2. See introduction of Pre-Reading/Reading Section regarding the rationale for conducting this program.

3. Teacher designates name of puzzle piece depending on picture. The numbers can be written on the back of the puzzle piece and in the appropriate space on the puzzle form.

Example: #1. Fish
#2. Tree
#3. Flower
#4. Wagon



Pupil: Robert

Date Started: 9/12

Date Completed:

Program: Four piece non-interlocking puzzle

Verbal Cue:
"Robert, put the pieces in the puzzle."

Materials:
1. Four piece non-interlocking puzzle
2. Booth with desk
3. Reinforcer

Non-Verbal Cue
Rotate position of puzzle pieces between each trial.

Reinforcement Procedure:
Primary/tangible paired with social praise

Correction:
"No, Robert, put the pieces in the puzzle."
Physically assist him to do step correctly.
Give social reinforcement upon completion of task.

Criterion:
Three consecutive correct responses before given next phase/step.

Teaching Research Infant and Child Center Raw Data Sheet

Name: Robert

Program: Four piece non-interlocking puzzle

X = Correct
0 = Incorrect

Reinforcer	Phase	Step	Trials										Comments	Date
Baseline	I		X/X											9/12
↓		3	IV 0/0	III 0/0	II X/X									↓
		2	0/0	0/X	/									
		1	0/0	X/X	/									
	III	2												

Approximate Age for
Skill Acquisition
2½-3 years

N. Puts on Coat or Jacket, Unfastened

Terminal Objective: Student independently puts on coat or jacket.

Prerequisite Skill: Grasping ability; appropriate range of motion.

Phase I	Student puts on jacket with right arm in sleeve, left arm in above elbow.
Phase II	Student puts on jacket with right arm in sleeve left arm in below elbow.
Phase III	Student puts on jacket with right arm in sleeve left hand started in sleeve hole.
Phase IV	Student puts on jacket with right arm in sleeve.
Phase V	Student puts on jacket with right arm in sleeve up to elbow.
Phase VI	Student puts on jacket with right hand started in sleeve.
Phase VII	Student puts on jacket when guided to hold right side with left hand.
Phase VIII	Student puts on jacket when handed to him in correct position: held at neck, inside facing student.
Phase IX	Student puts on jacket when handed to him.
Phase X	Student gets jacket from designated place and puts on jacket.

Steps:

1. Jacket 1-2 sizes larger.
2. Own jacket.

Suggested Materials: Use type of jacket or coat normally worn by student for step 1. Use student's own jacket for step 2.

Teaching Notes:

1. Teaching Sequence - Teach this skill beginning with Phase I, step 1. Then teach Phase II-X, step 1 before teaching step 2, Phases I-X.
2. This is a reverse chain sequence, therefore:
    a. The teacher assists the student in the performance of all phases listed below the prescribed phase. The degree of assistance is usually physical.

Pupil: Robert Date Started: 9/12 Date Completed:	Program: Puts on Jacket
Verbal Cue: "Robert, put on your coat."	Materials: 1. Blue jacket from clothing box on material shelves 2. Booth 3. Reinforcer
Non-Verbal Cue: Student should be standing, adult facing student.	Reinforcement Procedure: Primary/tangible paired with social praise
Correction: "No, Robert, put on your coat." Physically assist him to do step correctly. Give social reinforcement upon completion of task.	Criterion: Three consecutive correct responses before given next phase/step.

Teaching Research Infant and Child Center Raw Data Sheet

Name: Robert Program: Puts on Jacket

X = Correct
0 = Incorrect

Reinforcer	Phase	Step	Trials										Comments	Date
			X	IX	VIII	VII	VI	V	IV	III	II	I		
Baseline		2	0/0	0/0	0/0	0/0	0/0	0/0	0/0	0/0	0/0	0/0		9/12
		1	0/0	0/0	0/0	0/0	0/0	0/0	0/X	X/0	X/X	X/X		
Social/ Cookie	III	1	X	X	0	0	X	X	0	0	0	X		9/13
Social/ Cookie	III	1	0	X	X	0	0	0	0	0	0	0	Puts cookie down after taking first bite.	9/14
Social/ Juice	III	1												

G16

Approximate Age for Skill Acquisition

With Assistance to Turn On
Faucets 2-3 years
Independently 3-4 years

D. Washes Hands

Terminal Objective: Student washes hands independently.

Prerequisite Skills: Turns knobs, both directions

Phase I	Student turns water off.
Phase II	Student rinses hands under water.
Phase III	Student lathers soap onto backs of hands with palms.
Phase IV	Student lathers soap between fingers.
Phase V	Student replaces soap.
Phase VI	Student lathers soap by rubbing between palms.
Phase VII	Student wets hands with soap under water.
Phase VIII	Student picks up soap.
Phase IX	Student turns water on.

Suggested Materials: Bar soap

Teaching Notes:

1. Teaching Sequence - Teach Phase I followed by Phase II through IX.
2. This is a reverse chain sequence, therefore:
    a. The teacher assists the student in the performance of all phases following the prescribed phase. The degree of assistance is usually physical.
    b. The student completes the prescribed phase as described
    c. The student independently completes all phases preceeding the prescribed phase.
3. This sequence deals only with washing hands. It may be combined with A - Dries Hands.

Pupil: Robert

Date Started: 9/12

Date Completed:

Program: Washes Hands

Verbal Cue:

"Robert, wash your hands"

Materials:

1. Run program in bathroom
2. Soap
3. Reinforcer

Non-Verbal Cue:

Stand behind student. Read teaching notes.

Reinforcement Procedure:

Primary/tangible paired with social praise.

Correction:

"No, Robert, wash your hands." Physically assist him to complete task correctly. Give social reinforcement upon completion of task.

Criterion:

Three consecutive correct responses before going to next phase/step.

Teaching Research Infant and Child Center Raw Data Sheet

Name: Robert
Program: Washes Hands

X = Correct
0 = Incorrect

Reinforcer	Phase	Step	Trials										Comments	Date
Baseline	IX-I		IX 0/0	VIII	VII	VI	V 0/0	IV 0/0	III 0/0	II 0/0	I 0/0			9/12
Social/ Juice	I		0	X	0	0	X	0	X	X	0	0	Tried hard	9/13
Social/ Juice	I		X	0	0	X	X	0	X	X	X			9/14
Social/ Juice	II		X	X	X								Neat job	9/17
Social/ Candy	III		X	X	X								This seems too easy	9/18
Probe	VI-IV		VI 0/0	V 0/X	IV X/X									9/19
	✓													

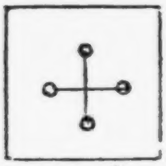
Approximate Age
for Skill Acquisition
4-6 years

G. Produces Cross

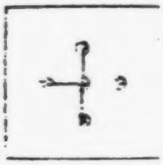
Terminal Objective: Student produces cross without a model.

Prerequisite Skills: Student can connect dots (Program F) and can draw both horizontal and vertical lines.

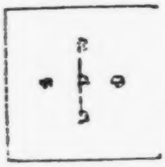
Phase I — Given a model, student draws cross with teacher assistance.



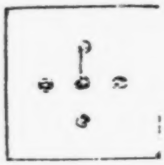
Phase II — Given a model, student completes cross.



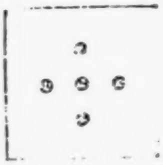
Phase III — Given a model, student completes cross.



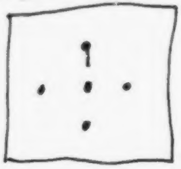
Phase IV — Given a model, student completes cross.



Phase V — Given a model, student draws cross.

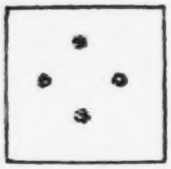


branch Va

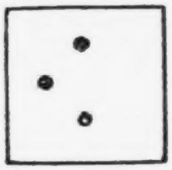


G. Produces Cross, Continued.

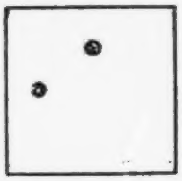
Phase VI Given a model, student draws cross.



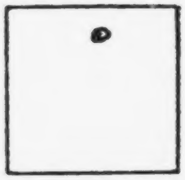
Phase VII Given a model, student draws cross.



Phase VIII Given a model, student draws cross.



Phase IX Given a model, student draws cross.



Phase X Student draws cross with a model.

Phase XI Student draws cross without a model.

Suggested Materials: Preprinted dots on paper as appropriate for phase, primary pencil.

Teaching Notes:

1. Teaching Sequence - Teach Phase I, followed by Phases II-XI.
2. This is a reverse chain sequence, therefore:
   a. The teacher assists the student in the performance of all phases listed below the prescribed phase. The degree of assistance is usually physical.

upil: Robert

ate Started: 9/12

ate Completed:

Program: Produces Cross

erbal Cue:

"Robert, make a cross."

Materials:

1. Booth with desk
2. Produces cross packet
3. Primary pencil
4. Reinforcer

on-Verbal Cue

Adult stands behind student and places pencil in student's hand after delivering cue.

Reinforcement Procedure:

primary/tangible paired with social praise

Correction:

"No, Robert make a cross." Physically assist him to do step correctly. Give social reinforcement upon completion of task.

Criterion:

Three consecutive correct responses before going to next phase/step.

Teaching Research Infant and Child Center Raw Data Sheet

Name: Robert Program: Produces Cross

X = Correct
0 = Incorrect

Reinforcer	Phase	Step	Trials										Comments	Dat
Baseline	XI-I		XI 0/0	X 0/0	IX 0/0	VIII 0/0	VII 0/X	VI X/0	V 0/0	IV 0/X	III X/X	II /	I /	9/12
Social/ Star	IV		0	X	0	X	X	X					No problem	9/13
Social/ Star	V		0	0	0	0	0	0	0	0	0	0	Drew both lines but didn't cross them.	9/14
Social/ Star	V		0	0	0	0	0	0	0	0	0	0	Same as yesterday. Tried hard but couldn't get it.	9/17
Probe	IV-I		IV x/x	III /	II /									
brench	Va	see T.A.												

Approximate Age
for Skill Acquisition
3-6 years

D. Draws Vertical Line

Terminal Objective: Student draws vertical line from a point on top of page to a point on bottom of page without a model.

Prerequisite Skills: Student can trace on a line one inch thick.

Phase I — Teacher models, student draws vertical line from top of paper to bottom within two parallel lines with teacher's assistance.

Phase II — Teacher models, student draws vertical line 3/4 way from top of paper to bottom with assistance and independently completes last 1/4 of line.

Phase III — Teacher models, student draws vertical line 1/2 way from top of paper to bottom with assistance and independently completes last 1/2 of line.

Phase IV — Teacher models, student draws vertical line 1/4 way from top of paper to bottom with assistance and independently completes last 3/4 of line.

Phase V — Teacher models, student draws vertical line from top of paper to bottom within two paralled lines with no assistance.

Phase VI — Student draws vertical line from top of paper to bottom within two parallel lines with no assistance.

The following steps apply to Phase VI only.

Steps:
1. Three inches between parallel lines.
2. Two and one-half inches between parallel lines.
3. Two inches between parallel lines.
4. One and one-half inches between parallel lines.
5. One inch between parallel lines.

Phase VII — Student draws vertical line from a point at top of page to a point on bottom of page with no assistance.

Suggested Materials: Primary pencil, paper with pre-drawn parallel line boundaries for Phase I-VI, plain paper for Phase VII. For Phases I-V use material specificed in step 1. Dots appear on the top and bottom of the paper for Phases I-VI. and are of a size comparable to the vertical lines. See the following for an example.

Pupil: Robert Date Started: 9/12 Date Completed:	Program: Draws Vertical Line
Verbal Cue: "Robert, draw a line like this."	Materials: 1. Vertical line packet of materials 2. Primary pencil 3. Reinforcer
Non-Verbal Cue: Model task before delivering verbal cue. Sit next to Robert at a small desk.	Reinforcement Procedure: Primary/tangible paired with social praise
Correction: "No, Robert, draw a line like this." Physically assist him to do task correctly and socially reinforce.	Criterion: Three consecutive correct responses before given next phase/step.

Teaching Research Infant and Child Center Raw Data Sheet

Name: Robert

Program: Draws Vertical Line

X = Correct
0 = Incorrect

Reinforcer	Phase	Step	Trials										Comments	Date
Baseline	VII		0/0											9/12
↓	VI		5 /	4 /	3 /	2 /	1 /							↓
	V		0/X											
	IV		X/0											
	III		0/0											
	II		0/X											
↓	I		X/X											↓
Social/ Juice	II		0	0	X	0	X	X	X				Worked hard	9/13
Social/ Juice	III		0	X	X	X							Nice job	9/14
Social/ Book	IV		X	X	X								Great	9/15
Social/ Car	V		X	X	X								Easy for him	9/16
probe	VII-VI	VII	/											
		VI	5/	4/	3/	2/	1/		623					

Approximate Age for
Skill Acquisition
2½-3½ years

H. Finds Colors

Terminal Objective:	Student finds colors red, yellow, blue, green, orange, purple, black, white and brown with three distractors presented.
Prerequisite Skills:	Student can manipulate materials and has sufficient visual acuity.
Phase I	Student finds color red.
Phase II	Student finds color yellow.
Phase III	Student finds color blue.
Phase IV	Student finds color green.
Phase V	Student finds color orange.
Phase VI	Student finds color purple.
Phase VII	Student finds color black.
Phase VIII	Student finds color white.
Phase IX	Student finds color brown.

The following steps apply to each of the phases above.

Steps:

1. No distractors are presented.
2. 1 distractor is presented.
3. 2 distractors are presented.
4. 3 distractors are presented.

Suggested Materials: Colored blocks or construction paper may be used with this skill. Shapes of blocks or construction paper should be the same.

Teaching Notes:

1. Teaching Sequence - Teach this skill beginning with Phase I, step 1. Then teach Phase I, steps 2, 3, and 4 before teaching Phase II, steps 1, 2, 3 and 4. Continue teaching the remaining phases and steps in the same manner.

2. This is not a cumulative skill. Therefore, frequent review of each of the phases at step 4 is necessary.

Pupil: Robert Date Started: 9/12 Date Completed:	Program: Finds Colors
Verbal Cue: "Robert, find ______."	Materials: 1. Color cards 2. Booth with a desk 3. Reinforcer
Non-Verbal Cue Colors are placed on worktable in front of student. Trainer sits across table from student. Rearrange color cards after each trial.	Reinforcement Procedure: Primary/tangible paired with social praise.
Correction: "No, Robert, find ______." Physically assist to find correct color, then give social reinforcement upon completion of task.	Criterion: Three consecutive correct responses before going to next phase/step.

Teaching Research Infant and Child Center Raw Data Sheet

Name: Robert

Program: Finds Colors

X = Correct

0 = Incorrect

Reinforcer	Phase	Step	Trials										Comments	Date
Baseline	IX-I	4	IX 0/0	VIII 0/0	VII 0/0	VI 0/0	V X/X	IV X/X	III X/X	II X/X	I X/X			9/12
		3	0/0	0/0	0/0	0/0	/	/	/	/	/			
		2	0/0	0/0	0/0	0/0	/	/	/	/	/			
		1	X/X	X/X	X/X	X/X	/	/	/	/	/			
Social/ Juice	VI	2	0	X	0	X	X	X					Very good	9/13
Social/ Juice	VI	3	X	X	X									9/14
Social/ Juice	VI	4	X	X	X								This was easy	9/15
Probe Social Juice	VII	4-1	4 X/X	3 /	2 /	1 /								9/18
Probe Social Juice	VIII	4-1	4 X/X	3 /	2 /	1 /								9/19
Probe Social Juice	IX	4-1	4 X/X	3 /	2 /	1 /								9/20
generalization posttest		4	I /	II /	III /	IV /	V /	VI /	VII /	VIII /	IX /			
				Cue: Robert show me the ______ one.								
				material: use colored bears G25								

Dr. Norman Hankins
Dr. Hester Clark
Dr. William Caskey
Dr. Booney Vance

East Tennessee State Universtiy
Johnson City, Tennessee 37614

The Use of Standardized Ability and Achievement Instruments with Rural Handicapped Children & Youth: Issues, Concerns & Suggestions

Abstract

Many major issues face the field of psychoeducational assessment of exceptional children and youth who reside in rural areas. Some of the issues are cost-effectiveness, choice of procedures and instruments, the technical quality of some of the more popular instruments, the lack of expertise demonstrated by some examiners, and language components of various tests (bilingualism). Such issues naturally lead to charges of discriminatory practices in assessment and diagnosis of rural children and youth, especially exceptional students.

The purpose of this proposed symposium is to present a review of current findings on such instruments as the Test of Nonverbal Intelligence, WISC-R, Quick Test of Intelligence, Test of Adolescent Language, and Woodcock-Johnson regarding equivalency and technical adequacy as related to children and youth living in rural areas. Specifically, the symposium will present data regarding the performance of children and youth residing in the East Tennessee, Southwest Virginia and Western North Carolina regions on the content validity, concurrent validity and ethnic and sex differences on the above memtioned instruments. Case studies will be included in the presentation. Of special interest will be the results of studies conducted over a nine year period on the WISC-R for a group of rural children.

In addition, an Assessment Question Model will be presented which is designed to develop a structure and purpose for the psychoeducational/diagnostic process. A step-by-step process for conducting psychoeducational assessment will be presented. Participants participation will be encouraged and handouts will be available.

Participants

Norman E. Hankins, Ed.D., Chairperson & Professor - Principal Presentor Department of Human Development & Learning, East Tennessee State University

Hester Clark, Ed.D., Coordinator & Professor, Special Education - Presentor Department of Human Development & Learning, East Tennessee State University

William E. Caskey, Ed.D., Professor of Special Education - Presentor Department of Human Development & Learning, East Tennessee State University

Booney Vance, Ph.D., Research Director, Center for Early Childhood Learning & Development, Department of Human Development & Learning, East Tennessee State University - Discussant

Phone Numbers for the Above

Dr. Hankins: 929-4185 (business) 753-5137 (home) (615) area

Dr. Clark: 929-4610 (business) 928-7098 (home) (615) area

Dr. Caskey: 929-4194 (business) 929-9315 (home) (615) area

Dr. Vance: 929-5824 (business) 929-1219 (home) (615) area

PROGRAM EVALUATION FOR GIFTED

Roberta R. Daniels
Coordinator of Gifted, Talented
and Creative Program
Arkansas State University
State University, AR 72467
501-972-3061

Program Evaluation for Gifted

The basic structure is just the beginning of any program, if the program is to be a valuable investment. Internal and external improvements are ongoing if the value of the program is to be realized or increased. Annual maintenance requires contributions from many people in the community. We need evaluation (or assessment) so that we improve the entire program, not just separate components. "Evaluation properly planned can provide the basis of support for gifted programming" (Hall, 1980, p. 12).

Questions typically asked relating to evaluation are reflected as follows:

How do we know there is a need for evaluation?

What are major things we want to learn when conducting an evaluation?

Where is the evaluation to take place?

How do we "keep track" of what everyone is doing? Do teachers follow specific teaching models?

What decisions are to be made about who is identifiable and how?

When and how are people to be informed during the evaluation period?

Who is responsible for carrying out the evaluation?

What are we expected to accomplish relative to curriculum before, during, and after the evaluation?

What data are to be made available?

Who reviews the data?

What analysis is done regarding the data and the program?

Who interprets the findings?

Who views the results?

What are the implications for administrative planning?

Reviewing the list of questions one quickly surmises that the purpose of evaluation is to make reasonable judgements about: The effectiveness of identification, curriculum designs, teaching strategies, administrative arrangements and how the information is to be utilized. Positive and negative effects of various program features must be evaluated in order to guide local decision making toward appropriate modifications, if they are warranted. It is important to plan evaluation early, in order to eliminate personalities inhibiting an objective evaluation process. Small schools in rural areas will find this feature especially valuable.

Programs for the gifted and talented will be carefully scrutinized as we compete for limited finances. We cannot rely on conjecture or feelings to persuade public agencies to commit funds to programs for the gifted. We must provide convincing evidence on the effectiveness of programs for developing the potential of gifted students.

Program evaluation is the deliniation (graphically or verbally), collecting, and reporting of information for decision making purposes. This criteria is important because it identifies the basic stages in the evaluation process and stresses the interrelationship between evaluation and decision making.

Evaluation is done to keep a program alive and constantly improving. Documentation is part of the evaluation process that enhances maintenance and growth. Williams (1979) suggested that students, parents, teachers, and administrators initially examine what exists in a school program and then consider what needs to be established for an optimum learning environment. Williams (1979) has published an instrument which he suggests be completed by all "stockholders" in the program. All interested people that participate respond to questions Williams designed in the instrument addressing eight areas: General Intellectual Abilities, Specific Academics, Leadership, Creativity, Visual/Performing Arts, Psychomotor, Affective, and Vocational Careers.

Program evaluation models have been presented in literature which address a variety of approaches to assess the resources, activities, and objectives. Evaluation procedures must be planned in the beginning of program development. For example, as objectives are planned based upon students abilities the procedures must also be planned as to what kind of data collection is to take place, when the data collection is to be done and by whom. Documentation is essential to evaluation, but the various pieces of evidence must be planned in advance as a part of the program. Resources, such as personnel, books, special funding sources, and facilities provide investments in the program and provide one major aspect of record keeping important for evaluation. Activities, such as specific teaching techniques, teacher inservice, and involvement of parents provides another aspect of program evaluation. The Objectives which address program outcomes may be measured by attitudes, behaviors, and products. These objectives are usually addressed by the utilization of a variety of instruments involving students, parents, teachers, and other involved personnel. Reliable evaluation is usually associated with multiple assessment procedures. Many of these instruments are readily available and will be shared with the participants.

Evaluation procedures may be time consuming to plan and implement, yet relatively simple when carefully planned. Input, process, and outcome will be discussed as three major steps in continual program evaluation for the gifted. Formative and summative evaluation will be discussed as they relate to the decision making process. Specific instruments will be shared with the audience as well as an extensive reference list. Evaluation is the key to what is really effective programming for the gifted. This presentation will facilitate appropriate evaluation procedures.

Reference

Hall, E. G. (1980, Nov/Dec). Comprehensive evaluation of gifted programs: A matrix method. G/C/T, 10, 12-16.

Williams, F. (1979). Performance levels of a school program survey (PLSPS). Buffalo, NY: DOK.

Angela G. Deal
Carol M. Trivette
Janet C. Weeldreyer

Family, Infant and Preschool Program
Western Carolina Center
Morganton, North Carolina 28655

Family-Focused Services
# of the
Family, Infant and Preschool Program

Family-Focused Services of the Family, Infant and Preschool Program

In this presentation we describe how the Family, Infant and Preschool Program (FIPP) uses a needs-based, social support approach to provision and mediation of both child- and family-level resources and services. FIPP is an outreach unit of Western Carolina Center located in Morganton, North Carolina. The program provides home-, center-, and community-based services to approximately 300 families of handicapped, retarded, delayed, and at-risk children birth to six years of age. Detailed descriptions of FIPP can be found in Dunst (1985) and Dunst, Trivette, McWilliam, and Galant (in press).

The needs-based assessment and intervention strategy used by FIPP includes three major components: specification of family needs, identification of sources of support and resources to meet needs, and staff roles in helping families access resources from their support networks (see Figure 1). Family concerns, issues, and priorities are first identified using a number of needs-based assessment procedures and strategies. Once needs have been specified, the parents and staff together "map" the family's social support network in terms of both existing sources of support and untapped, but potential sources of aid, assistance, and resources. After needs and both sources of support and resources have been identified, staff function in a number of different capacities to enable and empower families in order that they may become more competent in being able to get needs met and achieve desired goals (Dunst, 1986a; Dunst & Trivette, in press). This three-component process was stated in the following manner by Hobbs, Dokecki, Hoover-Dempsey, Moroney, Shayne, and Weeks (1984) in terms of the goal of assessment and intervention from a family systems perspective: "The goal...is to identify family needs, locate the informal and formal resources for meeting those needs, and help link families with the identified resources." (p. 50) To do so both enables and empowers families in a way that makes them more competent and better able to mobilize their resources in a manner that promotes child, parent, and family functioning (see especially Dunst, 1986a).

Conceptual Bases of the Assessment and Intervention Procedures

We have developed an approach to assessment and intervention that is family and systems oriented, and which attempts to provide and mediate the types of support that directly and indirectly promotes child, parent, and family development (Dunst, 1985; Dunst et al., in press). This approach draws from several social systems and ecological theories described below.

Our approach to assessment and intervention integrates and synthesizes the theoretical formulations and empirical evidence from a number of social systems models, including social network theory (e.g., Bott, 1971; Mitchell & Trickett, 1980; Mueller, 1980; Unger & Powell, 1980), human ecology (Bronfenbrenner, 1979; Cochran & Brassard, 1979), help-seeking theory (Gourash, 1978), and adaptational theory (Crnic, Friedrich, & Greenberg, 1983a). Taken together, these four separate but complementary theoretical orientations indicate that ecological settings and social units, and events within them, do not operate in isolation but affect one another both directly and indirectly so that changes in one unit or subunit reverberate and impact upon members of other units.

Social network theory attempts to describe the properties of social units, the linkages among units, and how provision of support by network members promotes individual, family, and community well-being (Cohen & Syme, 1985). Human ecology emphasizes the interactions and accommodations between a developing person and his/her animate and inanimate environment, and how events in different ecological settings directly and indirectly affect the behavior of a developing person (Bronfenbrenner, 1979; Cochran & Brassard, 1979). Help-seeking theory examines the conditions which affect a decision to seek help, and from whom help is sought (Dunst & Trivette, in press). An inverse relationship is predicted between help-seeking from informal (e.g., friends) and formal (e.g., professionals) sources of support. To the extent that help from informal social network members buffer the stresses and strains associated with different life crises (e.g., the birth and rearing of a handicapped youngster), as well as promotes adaptive functioning, the need for more formal sources of support is lessened. Adaptational theory attempts to explain how ecological influences affect reactions to the birth and rearing of an atypically developing child, and how different ecological forces, including social support, either positively or negatively influence a family's ability to cope and adapt to the birth and rearing of a handicapped child (Crnic et al., 1983a). Collectively, these four theoretical orientations also provide a framework for understanding how needs, resources, support, and family and professional roles affect family functioning in a way that promotes development in a proactive manner.

Needs, Resources, and Social Support

The complex relationships between needs, resources, and support necessitates that we have some understanding about the meaning of these terms. We begin with definitions and discussions of these constructs from a social systems orientation.

A Social Systems Perspective of Needs

In attempting to assess various levels of family functioning, one must first arrive at some notion about what all families need for stability and growth. Although the term "need" will always require some subjective definition that takes social context into consideration, it is critical, nevertheless, to have some basis by which to match needs and resources. Table 1 provides a framework for conceptualizing family needs together with several examples of those resources and support that are included within each category of family functions.

The notion of "environmental press" is central to understanding how needs influence behavior. Garbarino (1983) defined environmental press as:

> The combined influence of forces working in an environment to shape the behavior and development of individuals in that setting. It arises from the circumstances confronting and surrounding an individual that generate (needs and) psychosocial momentum, which tend to guide that individual in a particular direction. (p. 8)

This set of conditions suggest that those "forces" that are strongest will take precedence, and steer behavior in certain directions. Thus, a person's perception of what constitutes the most important needs at a particular point in time will likely assume priority status, and guide the person's behavior.

The proposition that individual and family needs are one set of forces that affect behavior is fundamental to family systems theory (Hartman & Laird, 1983). Moreover, because needs can be roughly ordered in a hierarchy from the most to least basic, emphasis is likely to be placed on meeting unmet needs that are at the top of the hierarchy (i.e., those that are most basic). The contention that needs can be ordered on a continuum and both steer and propel behavior is not new. These notions can be traced to Lewin's (1931) field theory of environmental psychology, Hull's (1943) and Murray's (1938) theories of motivation, and Maslow's (1954) theory of self-actualization. Maslow, for example, placed needs in a hierarchy, and stipulated that unmet basic needs "dominate" behavior and interfere with achievement of higher-level needs.

Social Networks As Sources of Support and Resources

Social networks are the primary sources of support and resources for meeting needs. Social support is defined as "the resources provided by other persons...(and) differs in type and function...at different periods of life" (Cohen & Syme, 1985, p. 4). Resources are defined as "something that lies ready for use or that can be drawn upon for aid or to take care of...in time of a need or emergency" (Webster's New World Dictionary, 1974, p. 1211). Resources and social support include the emotional, physical, informational, instrumental, and material aid and assistance provided by others to maintain health and well-being, promote adaptations of life events, and foster development in an adaptional manner.

Until now, the social support construct has been difficult to operationally define, and thus hard to interpret clinically. Recent advances, however, have made it clear that it is a multidimensional construct (Barrera et al., 1981; Barrera & Ainlay, 1983; Storkes & Wilson, 1984) and that different types of social support have differential impacts (Dunst & Trivette, 1984; Mitchell & Trickett, 1980).

The most ambitious attempt to define the social support construct at the level of specificity that permits one to assess "who did what to whom" is presented in a recent work by Cohen and Syme (1985) who stated that "We believe that further advances in the ability to conceptualize and assess the *kinds of support provided* are necessary before it will be possible to understand the support process and realize its clinical possibilities" (p. 13). According to House and Kahn (1985), the term "social support" refers to a number of different aspects of social relationships. It can be defined in terms of *relational* components, "the existence of quantity of social relationships; *structural*, the characteristics of the network; and *functional*, the type of support provided.

Besides the relational, structural, and functional components of support, *satisfaction* with support has been identified as an important part of the social support domain (Barrera et al., 1981; Hirsch, 1979). In our own work, we have identified a fifth support component which reflects the match between perceived needs and the availability of the assistance to meet these needs. We termed this component of the social support construct *constitutional* to reflect attempts to improve one's well-being by seeking support essential to meeting self-identified needs.

Figure 2 shows the potential connections among the different components of the social support construct. This conceptualization is derived, in part, from the work of Hall and Wellman (1985) and House and Kahn (1985) and has evolved from our work on explicating the components of the social support construct. The existence or quantity of relational support is a necessary condition for and hence a partial determinant of (a) defining needs (constitutional), (b) the structural characteristics of one's social network, and (c) the types of help and assistance available from network members. Similarly, both constitutional needs and network structure may partially determine the particular types of support that are procured and offered. Finally, the types of support provided, especially the relationship between constitutional and functional support, will in part determine the degree to which one finds the aid and assistance helpful, and thus is satisfied with the support.

A sizable body of evidence indicates that social support has positive influences on personal and familial health and well-being (e.g., Cohen & Syme, 1985; Dean & Lin, 1977; McCubbin et al., 1980; Mitchell & Trickett, 1980). Recent work has demonstrated that the positive effects of social support go beyond mediation of intrapersonal and intrafamily physical and psychological health to include influences on parenting, family interactions, and child behavior. There is a growing body of evidence that social support both directly and indirectly influences attitudes toward parenting (Crnic, Greenberg, Ragozin, Robinson, & Basham, 1983b); parental styles of interaction (Crnic et al., 1983b, Crockenberg, 1981; Embry, 1980; Philliber & Graham, 1981; Weinraub & Wolf, 1983); parental attitudes, expectations, and aspirations for their children (Lazer & Darlington, 1982); and child behavior and development (Crnic et al., 1983b; Crnic, Greenberg, & Slough, 1986; Crockenberg, 1981).

The role that social support plays in (a) buffering families from the negative effects of the birth and rearing of a handicapped child and (b) promoting parent, family, parent-child, and child functioning, has been the focus of a series of studies in our own program (Dunst, 1985; Dunst & Trivette, 1984, 1986; Dunst, Trivette, & Cross, 1986a, 1986b; Trivette & Dunst, 1986a, 1986b). Collectively, our findings suggest the pattern of direct and indirect influences depicted in Figure 3 (see Dunst et al., in press). The results from our studies show that (a) social support is the principle determinant of health and well-being, (b) social support and well-being are partial determinants of family integrity and functioning, (c) social support, well-being, and family functioning affect the styles of interactions parents use with their children, and (d) social support, well-being, and interactional styles influence parental perceptions of child functioning, and to a smaller degree, actual child development. Thus, to the extent that we can identify needs and help families access resources from their social support networks, the likelihood of promoting positive functioning should be enhanced considerably.

Professional Roles in Enabling and Empowering Families

The approach to assessment and intervention proposed in this paper necessitiates a shift in the roles professionals play in providing and mediating provisions of support and resources to families. This is the case because different needs dictate different types of interventions, and because needs change considerably as a function of both normative and non-normative life changes (Figley & McCubbin, 1983; McCubbin & Figley, 1983; Dunst et al., 1986b). Consequently, truly individualized interventions tailor treatments to the needs of family members rather than making families fit into predetermined treatment programs.

Elsewhere we have proposed a series of 10 principles that suggest the characteristics of helping relationships that are most likely to enable, empower, and strengthen families as well as promote acquisition of the types of competencies th get needs met (Dunst, 1986; Dunst & Trivette, in press). These principles suggest new and expanded roles that professionals must assume in order to truly be responsive to a family's needs (see especially Slater & Wikler, 1986; Soloman, 1985). We now describe these roles to illustrate the broader-based strategies suggested by a social systems prespective of assessment and intervention.

Counselor/Listener

In this role, the professional adopts many of the techniques traditionally assumed by counselors and family therapists in helping parents adjust to the demands and difficulties of rearing a handicapped child. Although many families with a handicapped member do not experience increased conflict, some families do react negatively and thus require therapeutic interventions. In this role, the professional uses strategies that promote positive functioning and adaptability in response to the many challenges and frustrations associated with having a handicapped family member.

One of the most important counseling methods a professional can utilize is active and reflective listening. Functioning as a close, trusted support source and an active, empathetic listener is a role that is extremely important if family-professional partnerships are ever to be established. However, where the complexities of the family's emotional needs are beyond the competencies of the interventionist, it is most appropriate to assist the family in accessing professional counseling.

Consultant

The professional who functions as a consultant provides information and opinions in response to requests made by the family and/or their network members. Families oftentimes seek advice and information from professionals because they have a need to better understand the implications of their child's handicapping condition. For example, members of a family's informal support network may be reluctant or unwilling to help or assist the family because they lack knowledge and experiences with handicapped children. In the role of consultant, the professional provides information that the family can use to make informed decisions, and that their social network members can use to be a better source of support to the family.

Resource

Perhaps one of the most functional roles that a professional can assume is that of a resource to the family. In this capacity, the professional functions as a source of knowledge and skills that the family can utilize as needs arise. This is especially the case with regard to the types of services and community programs that are available to handicapped children and their families. Families are oftentimes not aware of what services exist in the community because of no previous need to access these resources. In a resource capacity, the professional functions as a natural "clearing house" of information about community resources, different types of services, and so on.

Enabler

Beyond a familiarity with various services and programs, a family must have the necessary competencies to access those resources. As an enabler, the professional creates opportunities for families to become skilled at obtaining resources and support. In this capacity, the professional moves beyond simply making families aware of services and programs to helping them become effective and successful in actually accessing resources and support. The critical element in performing this role is that the family be enabled to take action rather than the professional acting for the family. For example, rather than the professional providing transportation for a family, the family would be taught how to access transportation from their social network as a basis for getting needs met.

Mediator

In instances where families have had many negative encounters with their informal and/or formal social networks, it is often necessary for the family and/or professional to work directly with different individuals or agencies in a manner that promotes cooperation between the respective partners. One of the purposes of these encounters is to set the occasion for more positive interactions. In this role, the professional keeps interactions positive, task-oriented, and mutually reinforcing to both the family and other network members. Mediating interactions and exchanges between the family and other larger systems is a function that should be performed only long enough for the family to begin using its capacity for mobilizing support and accessing resources more effectively.

Catalyst/Mobilizer

As a catalyst, the professional helps to make the family aware of potential but untapped resources and sources of support, as well as helps them acquire the ability to mobilize support and access resources. As part of the process of helping families identify persons in their social networks (relatives, friends, neighbors, employers, clergy, etc.), the professional and family explore ways in which those individuals may be used as a source of aid and assistance. As a mobilizer of support network members, the professional works to bring together the "key players" needed in order for the family to gain access to resources and support.

Teacher/Therapist

The role most commonly assumed by professionals working with families of handicapped children is that of teacher or therapist with children, or teaching the parents to function in this capacity. This is an important role, and one that is crucial to the extent that enhancement of child competence will permit him or her to become a more socially-adaptive member of the family unit.

As part of interventions where parents or other caregivers are asked to function in an instructional capacity, we find it crucial that child-level interventions be incorporated into the daily routines of the family if those efforts are to promote rather than interfere with family funtioning. In this role, the professional helps parents find ways of incorporating "interventions" and "therapy" to normal daily activities rather than asking the families to set aside large amounts of time to function as a "teacher." Moreover, in line with our proactive stance toward children and families (Dunst, 1985), assuming the role of teacher or therapist means identifying child and parent strengths, and using them as a basis for addressing both child and family needs.

Advocate

In an advocacy role, the professional provides parents with the necessary knowledge and skills to (a) protect the rights of themselves as well as their children, (b) negotiate effectively with policy-makers, and (c) create opportunities to influence establishment of policies on behalf of children and families. This is accomplished in a proactive way with families, policy-makers, and policy-enforcers all taking shared responsibility on behalf of handicapped children.

Conclusion

Our experiences thus far in implementing a needs-based, social systems approach to assessment and intervention has taught us a number of things about the logistics of doing family-level work. First, we cannot emphasize enough the importance of identifying family-level needs and goals, and basing all intervention efforts around these needs. Not doing so will almost certainly reduce the probability that families will show interest in participating in different intervention services (e.g., parent support groups). Second, the ability to meet needs and assist families in attaining goals they have set for themselves is best accomplished by (a) utilizing their informal support network to the extent possible and (b) enabling families to take an active role in accessing resources and support. There is a tendency for professional "helpers" to do everything for families where families become passive recipients of aid and assistance. To do so, supplants the family's natural support network, and oftentimes has harmful consequences, including attenuation of self-esteem, creation of dependency, and promotion of helplessness (see especially Dunst & Trivette, in press). Third, we find that asking professionals to assume more varied roles in working with families oftentimes elicits the response that to do so means added responsibilities to their already taxing jobs. The fact of the matter is, the broader-based orientation we have offered makes the professional's job a lot easier. This is the case because major emphasis is placed on promoting families' acquisition of competencies that permit them to become more independent and self-sustaining in meeting most day-to-day needs rather than the professional assuming responsibility for doing so. Thus, to the extent that professionals can enable and empower families in a manner that promotes their acquisition of self-sufficient competencies, the family is much more likely to be able to independently mobilize their resource and support network to get needs met.

The following is a description of a model-demonstration project at the Family, Infant and Preschool Program which operationalizes the needs-based, social systems approach. The services offered by this project are focused primarily on families who are approaching or are currently involved in a transition phase of service delivery for their child.

Project HAPPEN (Helping Agencies Promote Parent Empowerment through Networking) is a three year model-demonstration grant funded by U.S. Office of Special Education-Handicapped children -Early Education Projects. A major goal of this project is the empowerment of parents of special needs children to identify their needs and resources independently, as they transition among service delivery systems. Project HAPPEN works within the informal and formal support networks that the family already uses to meet their needs rather than creating new helping systems as needs change.

Project HAPPEN has developed a hierarchy of staff roles (figure 4) used in working with the family as they identify their needs, resources, and take and evaluate action to meet their needs. Staff utilize these as roles within the larger model of service delivery utilized by Project HAPPEN (see figure 5) The twelve (12) major components of this model are as follows.

1. Evaluation of Community Resources and Interagency Networking--The Educational Consultant visits agencies, service organizations, and other groups in a county, sharing information and materials on Project HAPPEN. He/she learns about community concerns, cooperative efforts already in place, and services available to families. Contact persons within each unit (e.g., agency, organization, group)complete the Interagency Cooperation Survey. All community contacts are documented on the Community Contact Sheet.

2. Involvement in Community Interagency Networking--The Educational Consultant develops informal relationships and cooperative agreements with community agencies and groups. These agreements are documented through personal letters to the contact person. The Educational Consultant participates in interagency meetings completing the Observations Scale of Group Interaction following each meeting. Networking activities are documented on the Community Contact Sheet.

3. Family Referral--The Educational Consultant receives referral information from the referral source. If the referral source is a professional, the Educational Consultant discusses the need to share these concerns with the family and documents this information on the Community Contact Sheet. If the referral source is a family member, the Educational Consultant discusses initial concerns, schedules a home visit, and documents the information on the Family Contact Sheet.

4. Initial Home Visit--The Educational Consultant visits the family at a convenient time and shares information about Project HAPPEN services. The Educational Consultant discusses ways that Project HAPPEN could be helpful. This visit is documented on the amily Contact Sheet.

5. Needs Identification--During the first home visit, the family completes the Family Needs Scale rating the extent to which their needs are met. The Educational Consultant discusses witha the family, any needs that require immediate attention and helps them generate options of action to take, offering information and support, if needed. This is documented on a Family Action Plan and Family Contact Sheet.

6. Network Mapping--During the second home visit, the family identifies people they have had contact with in the last six months in four ecological groups - intrafamily, family, informal, formal. Following

this activity, the Network Mapping Game is played to discover satifaction with and reciprocity of each support network member and needs that each network member helps to meet. This information is documented on the Social Network Matrix.

7. Assessment of Child and Parent Strengths and Needs--The parent(s) complete the Child Development Rating Scale during a home visit. The Educational Consultant is available to assist the parent if needed. This scale assesses the child's adaptive behavior in four areas communication, movement, daily living, and socialization. The parent(s) also complete the Parent Self-Awareness Scale rating his/her perception of competence in - interpersonal, intrapersonal, informational, and decision-making skills. This information is coded on a data sheet to evaluate child and parent strengths and needs.

8. Assessment of Empowerment Process--The Educational Consultant completes the Observation Scale of Parent Empowerment to assess family functioning in four key empowerment areas: (a) needs identification, (b) decision making, (c) action, and (d) evaluation. This information is coded on a data sheet to evaluate the family's strengths and needs.

9. Development of Family Action Plan--The Educational Consultant and family review the assessment information and develop a Family Action Plan. This plan outlines the needs the family will be addressing and who in their support network the family will be involved in meeting these needs. On the Family Action Plan is a task analysis of the action the family will take to meet each need. The role of the Educational Consultant is outlined within the plan. Needs the family has accomplished or is working on independently are documented to reinforce these actions that have been taken. The Educational Consultant documents this information on the Family Contact Sheet.

10. Intervention--As the family carries out the tasks outlined on the Family Action Plan, the Educational Consultant's involvement varies for each need. Involvement varies by staff roles (linkage, mediator, networker, resource) and by type of support given (instrumental, guidance, material, and emotional). If the family is involved in acessing services from agencies, such as school placement, the Parent-Professional Interaction Scale is completed. This information is documented on the Family Contact Sheet.

11. Revision of Family Action Plan--The Family Action Plan is changed as needs, resources, and level of parent emowerment changes. The plan is revised during a home visit as the Educational Consultant reviews action that the family has taken. The Educational Consultant helps the family evaluate the success of each action and works with the family to identify other needs they would like to address. The revision of the Family Action Plan may indicate a need to go back through the assessment process for updated information.

12. Resource Services to Family and Community--As the family develop skills and confidence in meeting their needs independently, the Educational Consultant moves into a resource role. In this role, the Educational Consultant is available to both the family and the community for information or training.

In order to promote and respond to the parents' sense of empowerment, staff change roles throughout the process of intervention. These roles are need specific assuring that parents' sense of competence vary according to the needs they are attempting to meet and the resources available to them specific to that need. These roles fit within the context of the broader role defined by FIPP.

The linkage role is used by HAPPEN staff in helping families identify their needs, networks, and resources available to them. Also staff use the linkage role in generating options with the family to used to meet their needs. In generating options, the staff member helps the family consider response cost and reciprocity issues and to consider options from within their informal support network, using formal resources only when necessary.

As mediators, Project HAPPEN staff members guide families in prioritizing needs, developing strategies to meet these needs and developing and implementing a plan of action to meet these needs. In the mediator role, staff reinforce the family's sense of competence, helping them expect successful completion of their actions. Also, vital to the parents sense of empowerment is their attributing these actions to themselves and their efforts not to the efforts of Project HAPPEN.

Much of Project HAPPEN's community level intervention is performed at a networker role level. In this role, Project HAPPEN models cooperative interaction within the community network and the competence of families to truly be a part of this network. Also as networkers, Project HAPPEN staff member supports the families as they take action to meet their needs, and evaluate the success of their efforts. As families successfully meet their needs and attribute this to their own efforts, performance history is effected and families sense of competence or empowerment develops.

In a resource role Project HAPPEN staff are available to both families and communities as needed with requests for support (information or training) initiating from them. As families meet their needs independently, they may periodically need information on new resources or have a new need arise that beings up an interests in new involvement. By varying staff roles along this continuum, Project HAPPEN supports families throughout transitions, as they develop a sense of empowerment.

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Table 1. Framework for Assessing Family Needs

Family Functions	Needs
Economic	Adequate amounts of money
	Ability to budget money wisely
	Funds to purchase necessities
Physical	Adequate nutrition, clean air, and water
	Adequate housing (space, safety, warmth, furnishings, etc.)
	Safe neighborhood; police and fire protection
	Access to preventive and therapeutic medical and dental care
	Access to a telephone; public or private transportation
Vocational	Gratifying work (employment) in and out of the home
	Opportunities for learning new skills and for personal achievement
Recreational	Time for daily rest and opportunities for activities other than work and home responsibilities
Educational	Time and adequate materials for developing the child(ren)'s knowledge, abilities, and skills
	Opportunities for adult education
Emotional	Positive relationships among family members and with others outside the family which offer expression of affection, respect, and support

Table 1, continued

Family Functions	Needs
Cultural/Social	Meaningful communications and interactions with extended family, neighbors, friends, and community Opportunities to share ethnic or value-related experiences with others

Note. Neither the family functions or needs are either exhaustive or mutally exclusive. They are meant to represent the myriad and range of family roles and behaviors that constitute appropriate targets from a social systems approach to assessment and intervention.

Figure Caption

Figure 1. A graphic display for representing the relationships between family needs, resources and support, and professional roles as the three major components of a social systems approach to family-level assessment and intervention.

Figure 2. Conceptual framework for assessing the components of social support and the relationships among the five major support components.

Figure 3. A model for depicting the direct and indirect influences of social support on parents, family, parent-child, and child functioning.

Figure 4. Project HAPPEN: Overview of staff involvement.

Figure 5. Project HAPPEN: Graphic representation of assessment and intervention model.

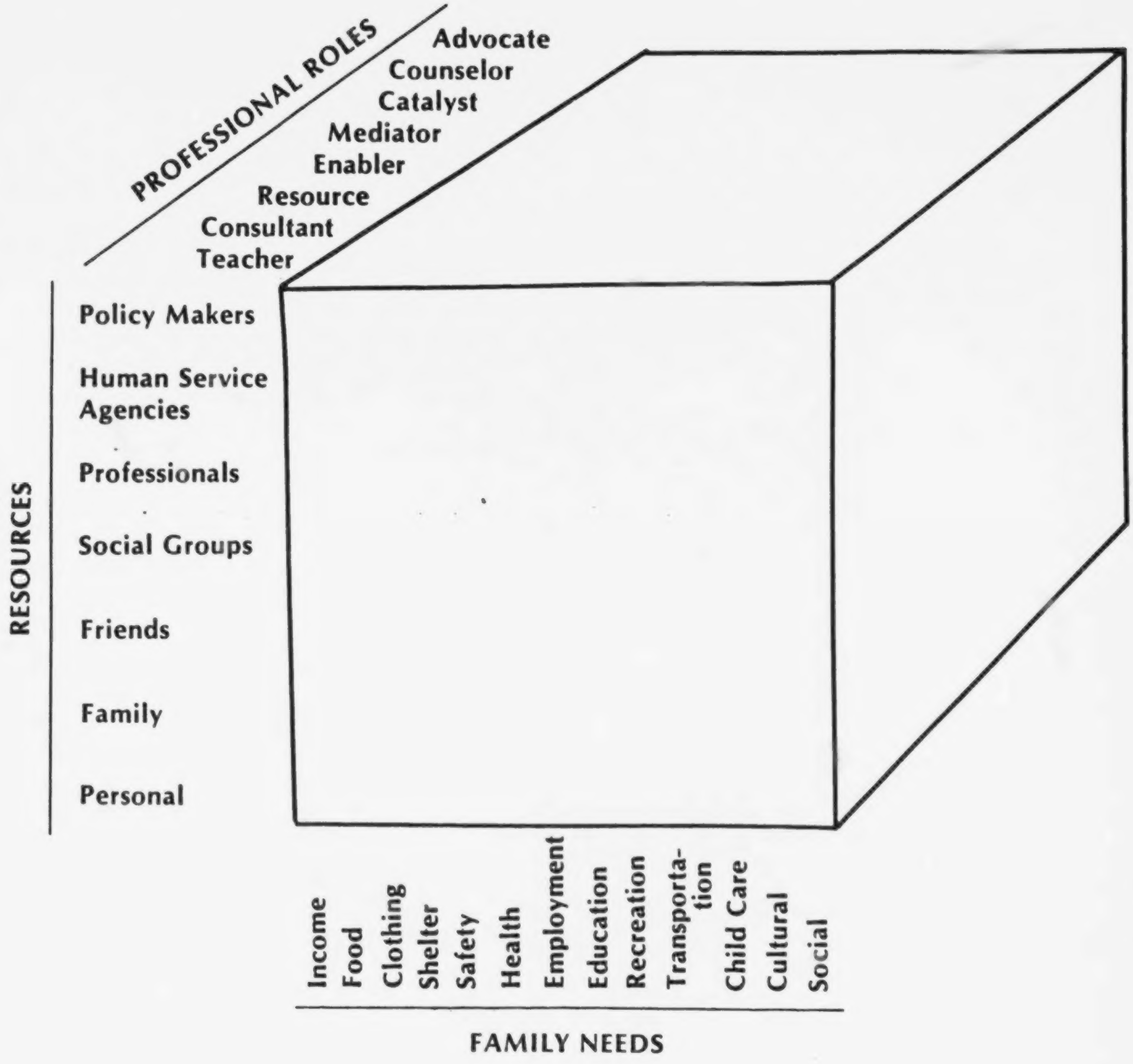

PROFESSIONAL ROLES
Advocate
Counselor
Catalyst
Mediator
Enabler
Resource
Consultant
Teacher
RESOURCES
Policy Makers
Human Service Agencies
Professionals
Social Groups
Friends
Family
Personal
Income
Food
Clothing
Shelter
Safety
Health
Employment
Education
Recreation
Transportation
Child Care
Cultural
Social
FAMILY NEEDS

Figure 1.

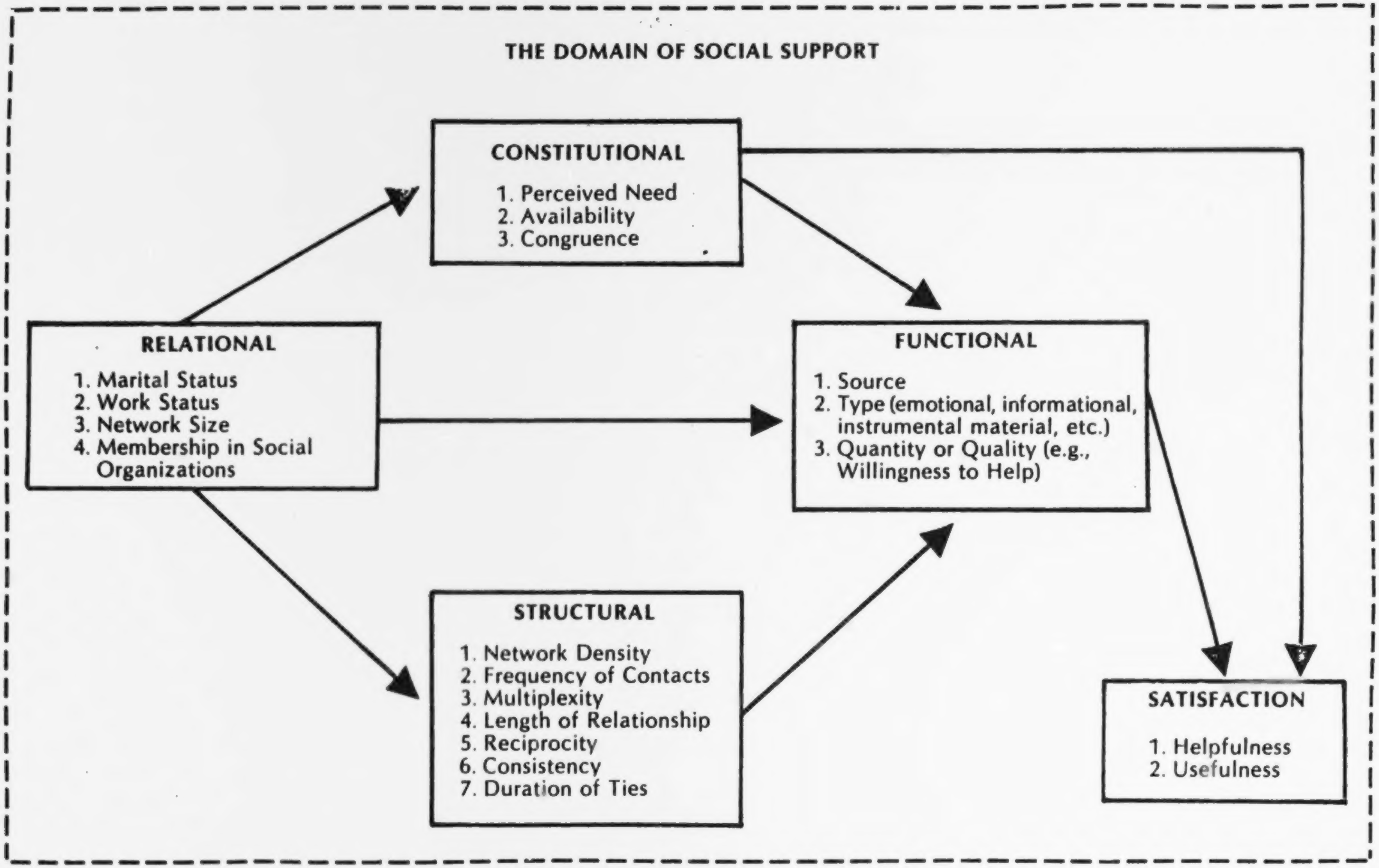

THE DOMAIN OF SOCIAL SUPPORT
CONSTITUTIONAL
1. Perceived Need
2. Availability
3. Congruence
RELATIONAL
1. Marital Status
2. Work Status
3. Network Size
4. Membership in Social Organizations
FUNCTIONAL
1. Source
2. Type (emotional, informational, instrumental material, etc.)
3. Quantity or Quality (e.g., Willingness to Help)
STRUCTURAL
1. Network Density
2. Frequency of Contacts
3. Multiplexity
4. Length of Relationship
5. Reciprocity
6. Consistency
7. Duration of Ties
SATISFACTION
1. Helpfulness
2. Usefulness

Figure 2.

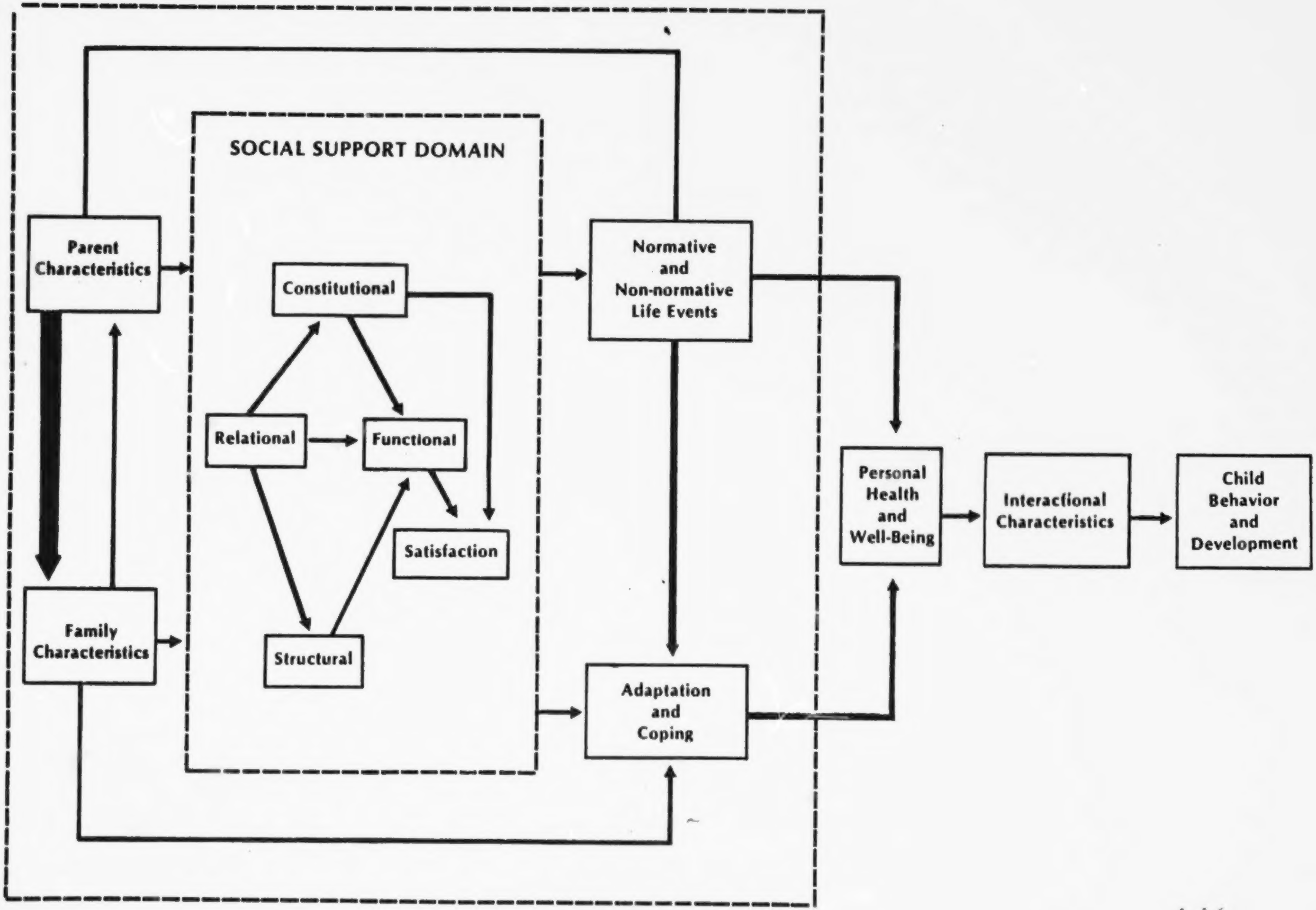

SOCIAL SUPPORT DOMAIN
Parent Characteristics
Family Characteristics
Constitutional
Relational
Functional
Satisfaction
Structural
Normative and Non-normative Life Events
Adaptation and Coping
Personal Health and Well-Being
Interactional Characteristics
Child Behavior and Development

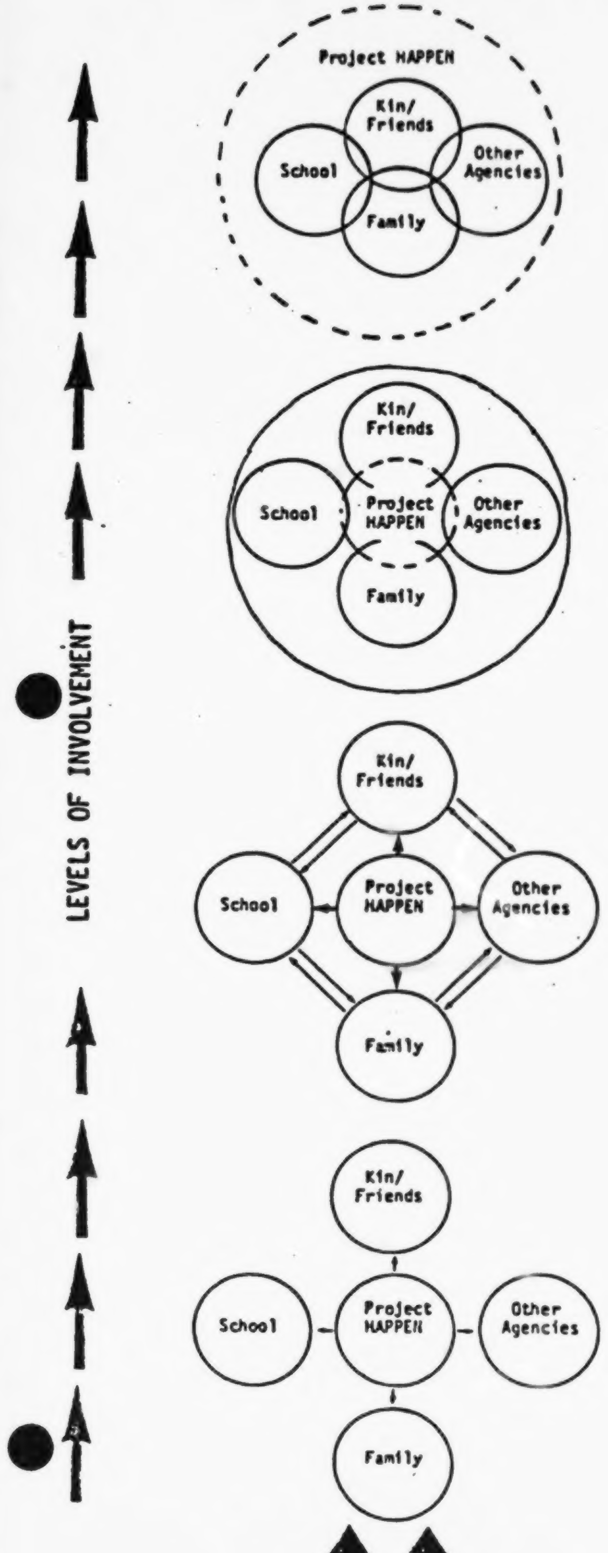
Figure 3.

Table 1. Framework for Assessing Family Needs

Family Functions	Needs
Economic	Adequate amounts of money Ability to budget money wisely Funds to purchase necessities
Physical	Adequate nutrition, clean air, and water Adequate housing (space, safety, warmth, furnishings, etc.) Safe neighborhood; police and fire protection Access to preventive and therapeutic medical and dental care Access to a telephone; public or private transportation
Vocational	Gratifying work (employment) in and out of the home Opportunities for learning new skills and for personal achievement
Recreational	Time for daily rest and opportunities for activities other than work and home responsibilities
Educational	Time and adequate materials for developing the child(ren)'s knowledge, abilities, and skills Opportunities for adult education
Emotional	Positive relationships among family members and with others outside the family which offer expression of affection, respect, and support
Cultural/Social	Meaningful communications and interactions with extended family, neighbors, friends, and community Opportunities to share ethnic or value-related experiences with others

Note. Neither the family functions or needs are either exhaustive or mutually exclusive. They are meant to represent the myriad and range of family roles and behaviors that constitute appropriate targets from a social systems approach to assessment and intervention.

FIGURE 4
OVERVIEW OF STAFF INVOLVEMENT
PROJECT HAPPEN


LEVELS OF INVOLVEMENT
Project HAPPEN
Kin/ Friends
School
Other Agencies
Family
Kin/ Friends
School
Project HAPPEN
Other Agencies
Family
Kin/ Friends
School
Project HAPPEN
Other Agencies
Family
Kin/ Friends
School
Project HAPPEN
Other Agencies
Family

RESOURCE
Level 4

In the Resource role a staff person is available to provide information or training to a family or a community at their request. The family plans, prioritizes needs, develops strategies to meet needs, and evaluates the outcome independently.

NETWORKER
Level 3

The Networker role describes staff involvement in working in a cooperative partnership with a family as they arrange, follow and evaluate their plan of action. The Networker participates in community activities to model cooperative interaction.

MEDIATOR
Level 2

The Mediator role involves a staff person actively guiding a family in planning and prioritizing needs, developing strategies, and implementing a plan of action to meet needs. A Mediator supports competence in the family and helps them develop skills needed to meet needs more independently.

LINKAGE
Level 1

The Linkage role is used by staff member working with a family to identify their needs, support networks and resources available. As a Linkage, a staff member helps a family generate options to meet needs.

Types of Linkages

Roles of Staff

Definitions of Roles

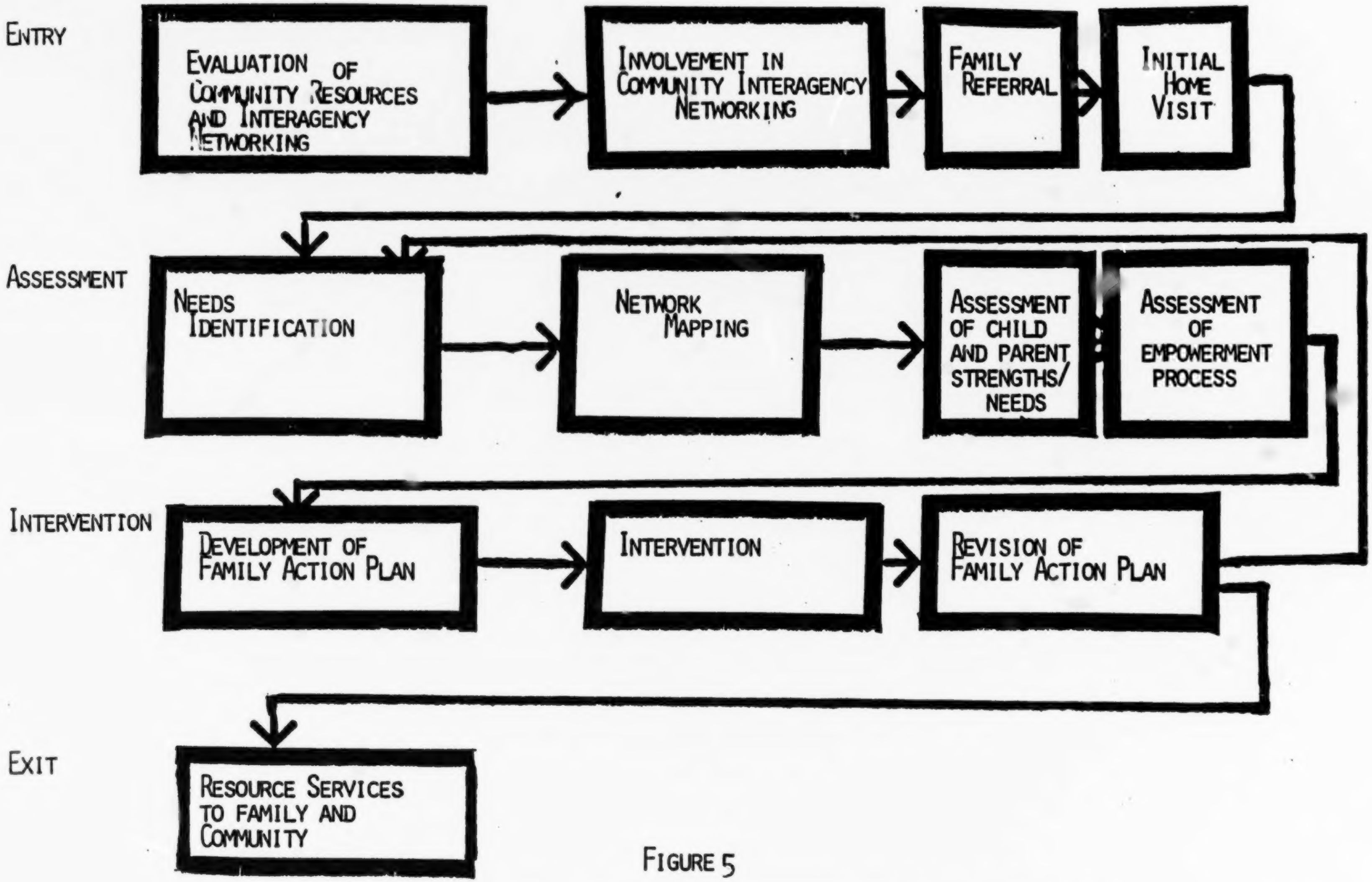

ENTRY
EVALUATION OF COMMUNITY RESOURCES AND INTERAGENCY NETWORKING
INVOLVEMENT IN COMMUNITY INTERAGENCY NETWORKING
FAMILY REFERRAL
INITIAL HOME VISIT
ASSESSMENT
NEEDS IDENTIFICATION
NETWORK MAPPING
ASSESSMENT OF CHILD AND PARENT STRENGTHS/ NEEDS
ASSESSMENT OF EMPOWERMENT PROCESS
INTERVENTION
DEVELOPMENT OF FAMILY ACTION PLAN
INTERVENTION
REVISION OF FAMILY ACTION PLAN
EXIT
RESOURCE SERVICES TO FAMILY AND COMMUNITY

FIGURE 5

GRAPHIC REPRESENTATION OF PROJECT HAPPEN ASSESSMENT AND INTERVENTION MODEL

Emily B. Hyatt
Dare County Schools
Manteo, NC 27954

ABSTRACT

Topic Area: Innovative Inservice Training

Dare County School

Computer-Assisted Instruction for Exceptional Students

A. Purpose

CAI....

*.is as effective as traditonal approaches

*.equal or better achievement in less time (rate)

*.increased motivation-positive attitude

*.longer attention span

*.tutorial and drill types more effective with lower ability students

*.learners who are hard to reach and teach become actively involved

*.should be used with other instruction

*.helpful to review previously learned material

*rate of retention may be lower than traditional instruction (some studies have shown), this is why CAI should be used with other instruction

*.CAI should represent only one part of the total learning experience

*.The average effect of CAI in 48 research studies was to raise student test scores...from the 50th to 63rd percentile

*.CAI has been reported to save anywhere from 39% to 88% of student learning time

B. Objectives

The exceptional faculty and staff of Dare County Schools subscribe to the philosophy set forth by the "State Plan for Computer Utilization in North Carolina Public Schools (January 1983)": The Microcomputer is an instruction tool to be used in all content areas, at all grade levels, and by all instructional and support personnel. Societal issues related to computers should be part of all curriculum areas.

CAI Long Range Goals

1. All exceptional students in the system will have an opportunity to acquire basic knowledge about computers and their input on society.

2. All exceptional students will be trained to use and be given regular access to computer tools.

3. Computer education will be integrated throughout the curriculum.

4. The computer will be used to assist in the development of individualized instruction for all exceptional students.

5. The impact of the computer on traditional curriculum areas will be evaluated with changes made accordingly.

6. Staff will be developed to the level necessary to accomplish the above goals.

C. Focus of Training

Topics for Discussion

Microcomputers and exceptional children

Advantages of the microcomputer

Instructional Applications

Discussion of Computer-Assisted Instruction (CAI)

Components of CAI:

- Drill and practice
- Tutorial
- Simulation
- Problem solving

Site Preparation, Equipment Protection, Software Organization

Software Evaluation & Recommendations

Resource Information

Development of CAI plans for Exceptional Children

Middle School 6-8 High School 9-12

D. Practical Implications for Rural Education

- CAI is suitable for all situations where repetition and practice can lead to skill and understanding
- The computer is infinitely patient, providing experiences and reinforcement in an individualized fashion
- When selecting software for these students, the amount and type of input required should be considered
- Answers should consist of one or two keystrokes
- Screen displays and instructions should be clear
- The microcomputer, when programmed, can:
    - Provide a multisensory approach to learning
    - Be used to teach a wide range of subject matter
    - Be used with diverse populations
    - Provide direct, individualized, interactive instruction
    - Allow a student to learn at his/her own rate
    - "Remembers" students responses
    - Provide instant feedback
    - Give a variety of reinforcements
    - Provide diagnostic and prescriptive information to the teacher
    - Be used as an ideal management and retrival system for student records, assessment scores, students objectives, and IEP's
    - Provide continuous encouragement to a student and facilitate active participation in the learning process
- Using the computer with EMH, EH, and LD students:
    - Present same information at individualized reading/conceptual levels
    - Self-pacing
    - Reinforcement/nonthreatening
    - Increases problem solving skills
    - Memory development

- .Multisensory presentation
- .Increased attention span
- .Speed of working

Using the computer with gifted/talented students:

- .Higher cognitive functions
- .Differintiated instruction
- .Efficient learning
- .Problem solving
- .No wait time
- .Gives a sense of being powerful
- .Learning is an active process
- .Emphasis on cognitive skills
- .Programming skills
- .Provides advanced instruction

CONCURRENT SESSIONS

TUESDAY, MARCH 17, 1987

1:10 - 2:40 PM

Sandra Silver
Bemidji State University
Bemidji, MN 56601

TOPICAL AREAS: Certification/Accreditation, Innovative Preservice Programs, Personnel Recruitment & Retention, Legal Issues, Research, Administration

COMPLIANCE WITH PL94-142 MANDATES: POLICY IMPLICATIONS

With the passage of PL94-142, a proliferation of multi-district regional arrangements for the provision and administration of special education programs appeared in rural areas. Despite this phenomenon, a review of the literature indicates a lack of detailed study on administrative arrangements for special education programs in rural areas. This study attempts to fill the gap by examining multi-district regional special education administrative arrangements to determine: the types of arrangements currently used in the provision of special education programs in rural areas; the aspects of PL94-142 that prove both least and most problematic for these cooperatives; and, the effectiveness of various types of cooperative arrangements in meeting the mandates of PL94-142.

To measure compliance, a questionnaire was developed based on the manuals used by The Federal Office of Special Education and Rehabilitation Services in monitoring the states for compliance with PL94-142 mandates. To determine content validity, the questionnaire was submitted to an expert panel. It was then pilot tested and revised.

The sample for this study was obtained by writing to each State Department of Education in Federal Education Regions IV and V and requesting a listing of special education cooperatives. These listings revealed 157 cooperatives in 10 states that served primarily rural areas. 135 (86%) completed questionnaires were returned.

The most popular type of multi-district arrangement in the regions surveyed were; joint agreement cooperatives that provide regional special education services while administrative authority remains with the local school district (38%), voluntary cooperatives that have administrative authority granted to them by the member school districts (25%), and intermediate units, the middle tier of a three tier state hierarchicy (18%). The least popular arrangements were regional state agencies where administrative authority rests with the State Department of Education (2%), satellite cooperatives where one school district assumes administrative authority for special education programs provided by neighboring school districts (4%), and special school districts (4%). Two percent of the sample failed to specify the type of cooperative arrangement employed.

According to this survey, rural cooperatives experience the least difficulty complying with PL94-142 mandates related to parental rights, student assessments, and the Individual Education Plan (IEP). Rural cooperatives experience the greatest difficulty complying with issues related to personnel knowlege regarding special education, PL94-142 timelines, and parental attendance at IEP meetings.

To determine if any of the cooperative arrangements examined led to greater compliance with PL94-142 mandates, three catagories were devised;

(1) legislated agencies including regional state agencies, mandated regional agencies and intermediate school districts, (2) voluntary cooperatives including satellite cooperatives, and (3) service agencies comprised of special school districts and joint agreement cooperatives. Three size categories were also devised; small (850 square miles or less), medium (851 to 2000 square miles) and large (over 2000 square miles). Approximately one-third of the responding districts fell into each size category.

Significant relationships failed to emerge between type of cooperative arrangement and compliance with the mandates of PL94-142. Significant relationships did emerge between size and compliance with PL94-142 mandates concerning assessment and placement of students referred for special education services. The results of this survey indicate that, wherever possible, voluntary cooperatives of limited size should be employed.

The lack of knowledge regarding special education evidenced by regular educators, special educators, and administrators has implications for rural teacher training programs. Because the majority of handicapped children residing in rural areas are mainstreamed for part of the day, both preservice and inservice training programs must emphasize serving the handicapped child in the regular classroom while providing information regarding special education laws and procedures.

Survey respondents frequently cited recruiting and retaining qualified special education personnel as hampering compliance with PL94-142 mandates. To alleviate this problem, teacher training programs must implement or expand programs that train special educators to serve in rural areas. These training programs should:

1. familiarize students with all aspects of PL94-142;
2. teach administrative skills including: policy and program development and implementation; finance; and curriculum;
3. prepare special educators to consult with regular educators regarding the placement of handicapped children including procedures for modifying the classroom environment and adapting teaching methods and materials;
4. enable teachers to work with parents, administrators, and other agencies;
5. teach assessment skills, including the ability to: conduct formal and informal assessments; understand various types of assessment reports; and translate assessment data into educational programs;
6. provide special educators with generalizable, non-categorical skills that will enable them to work with children possessing a variety of handicapping conditions;
7. enable students to serve as their own resources;
8. train students to develop community resources;and,
9. provide assistance for rural special educators during their first year of teaching.

Only when the above conditions are met will rural school districts be able to hire adequately trained teachers and provide appropriate programs for the handicapped children they serve.

Marilyn Johnson
Cheryl Amundsen
University of Alaska
Anchorage, AK 99508

ABSTRACT

The University of Alaska, Anchorage, is in the second year of a three year federal grant to deliver a graduate special education training program to teachers in rural and remote sites throughout a state two and a half times the size of Texas. The vast distances, the multicultural settings and the need for broad-based special education competencies have resulted in a unique delivery system for the off campus program. The purpose of this presentation is to share what has been learned about effective off campus delivery throughout the life of this grant and earlier efforts at distance education.

As a result of this presentation the participants will:

1. Learn about the major components of effective distance delivery which melds educational technology and good adult pedagogy with graduate degree standards/requirements.
2. Explore the strengths and weaknesses of integrated on/off campus programs vs. models which separate off campus delivery into other administrative organizations including continuing education, extension services and rural programs.
3. Review evaluation data that combine traditional on campus course evaluation with course delivery information and other consumer input.
4. Learn about the cost effectiveness of a model which has intentionally abandoned correspondence study for an integrated effort which includes multi-media presentations, advanced technology and personal contact.
5. Become a "distance learner" for a short time by using some of the support material developed to teach graduate professional courses to hundreds of teachers in rural and remote settings.

The presentors are uniquely prepared to deliver this material because of their long term involvement with the model in a very rural state. Their expertise comes from the areas of educational technology/design and special education.

The session addressed the following general conference topical area(s): Certification/accreditation; Cross cultural/migrant services; Innovative preservices and inservice training; Personnel recruitment and retention; Program evaluation; Technology; Research.

COMPLIANCE WITH PL94-142 MANDATES: POLICY IMPLICATIONS

Sandra Silver, Ph.D.
Assitant Professor
Dept. of Professional Ed.
Bemidji State University
Bemidji, MN 56601

The passage of PL94-142, The Education for All Handicapped Children Act of 1975, increased the awareness of the difficulties associated with the provision of special education services in rural areas. The law also spawned a proliferation of cooperative administrative arrangements as the provision of adequate special education services within an individual school district was often unfeasible due to limited resources and a scattered diverse special education population. The minimum allocation of $7500 per application for PL94-142 monies also fostered collaboration as many rural school districts were unable individually to generate a sufficient allocation.

Regional cooperatives are not a panacea for the difficulties inherent in providing special education services in rural areas. Cooperative arrangements vary on many dimensions including: number of school districts served; mode of governance; funding sources; staffing patterns; services rendered; professional personnel employed; and stated goals. Even where uniformity might be expected (i.e. intermediate units operating under the same state mandates) a large amount of variance occurs. Cooperative arrangements may also produce or exacerbate a variety of problems including: transportation difficulties, parental involvement, goal displacement, locus of decision making, physical location of the unit, personnel administration, and abrogation of responsibility for handicapped children to the cooperative unit (Helge, 1984; Kirmer, Lockwood, Mickler, & Sweeney, 1984).

There are ten components that have been identified as essential for a successful rural cooperative. These are:

1. legislation enabling cooperative development;
2. maintenance of local ownership of cooperative programs;
3. a spirit of cooperation among memeber school district;
4. protection of local autonomy;
5. dedicated leadership;
6. mission clarity;
7. ongoing planning;
8. clear lines of responsibility;
9. delegation of authority and responsibility; and,
10. adequate resources.

Given the challenge of implementing PL94-142 in rural areas and the growth of cooperative arrangements, this study is aimed at discovering the aspects of PL94-142 that prove both most and least problematic for rural special education cooperatives. It is also aimed at dicovering the most prevalent type of administrative arrangement in rural areas and whether cooperatives possessing the above components are more effective in implementing mandated special education procedures.

Another dimension addressed by this study is the relationship of size to compliance with PL94-142 mandates. Despite reorganization, many rural school districts lack an adequate population base to provide comprehensive special education programs. Therefore cooperative undertakings are recommended. Due to a lack of suggestions regarding optimal size, this study will examine the effects of cooperative size on compliance with PL94-142 mandates.

Despite a well recognized need, there is a dearth of research on special education in rural areas (Jordan, 1966; Sher, 1977; Helge, 1984a). The meager body of existing literature is viewed as: non-experimental; unsophisticated; largely experiential; unable to provide a comprehensive view of rural education; and limited in its usefulness for policy formation (Stephens, 1984). Thus, the need for research concerning rural special education is evident.

Method

For this study, a cooperative is any inter-district administrative arrangement that provides services to member school districts. Cooperatives range from informal agreements between two or more local school districts to structures imposed by a state education agency. There are eight basic types of cooperative arrangement:

1. regional state agencies where administrative authority remains with the state department of education;
2. formal intermediate units, the second level of a three tier state education hierarchy;
3. mandated regional service agencies that remain apart from the formal state education hierarchy;
4. special school districts enabled by state legislation to provide designated services in a given locality;
5. voluntary cooperatives with administrative authority granted by the local school district to a new unit that undertakes responsibility for the provision and administration of special education services;
6. joint agreement cooperatives, an undertaking by two or more local school districts to provide special education services on a regional basis with administrative authority remaining at the local level;
7. satellite cooperatives where one school district provides special education administrative services to a group of neighboring school districts; and,
8. school study (development) councils, a loose confederation of local school districts under the sponsorship of a local college of education whose purpose is to solve defined educational problems in member schools.

For this study, a cooperative is considered rural when serving an area with less than 150 inhabitants per square mile or where more than 60% of the county inhabitants live in rural areas as defined and measured by the United States Census Bureau. Cooperatives serving areas located within Standard Metropolitan Statistical Areas are not considered rural.

Sample

The United States is divided into ten Federal Education Regions. This study draws its sample from two of them: Region IV comprised of eight Southern States, Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee; and, Region V comprised of six

Midwestern States, Illinois, Indiana, Michigan, Minnesota, Ohio and Wisconsin. These regions were selected because they include some of the nation's most rural areas.

The survey sample was obtained by writing to the State Department of Education in each of these 14 states and requesting a listing of special education cooperatives. Two states, South Carolina and Florida, stated that cooperative arrangements did not exist and were eliminated from the sample. The remaining listings were examined to determine whether cooperative arrangements existed. Several lists failed to differentiate between individual school districts and cooperative arrangements. These states were recontacted to verify the existence of cooperative arrangements. This led to the elimination of Mississippi and North Carolina as their State Departments of Education indicated that cooperative arrangements did not exist. The remaining listings were examined to determine cooperatives serving primarily rural areas. 157 rural cooperatives in 10 states were identified. The director of each cooperative was selected for inclusion in the survey.

Instrument

To collect data regarding compliance with PL94-142 mandates, a written questionnaire was developed using the Total Design Method (Dillman, 1978). To determine content validity, the questionnaire was submitted to an expert panel including professors of special education, members of county offices of education, and one member of the Federal Office of Education. A pilot test was conducted. This led to further questionnaire revision.

Factor analysis using a varimax rotation was performed to determine the items accounting for the greatest amount of variance. This led to a reduction from 53 to 37 items. A reliability assessment of the questionnaire using Cronbach's Alpha resulted in a standardized item alpha of .85.

Compliance with PL94-142 Mandates

The following items were judged least difficult for rural cooperatives to implement because a minimum of 75% of the cooperatives surveyed indicated that they always complied with these items.

1. Individual assessments are performed by qualified personnel (98%).

2. Parental permission is obtained prior to assessing a child suspected of having special education needs (93%).

3. Parental approval is obtained prior to placing a student in a special education program (92%).

4. Due process procedures exist to resolve conflicts that arise between the parents and the school district regarding any aspect of the special education placement procedures (88%).

5. IEPs are reviewed on a yearly basis (85%)

6. Special education teachers attend the IEP review meeting (83%).

7. Children are assessed in their native language (83%).

8. Child Find activities are conducted (81%).

9. The IEP contains all the components required by law (80%).

10. The parents of each child referred for special education evaluation receive an explanation of their rights (77%).

11. Evaluations are conducted by a multidisciplinary team (77%).

12. No single procedure is used as sole criterion for placement in a special education program (77%).

13. If parents disagree with the team decision, attempts are made to reconcile differences (75%).

In contrast, the responding cooperatives reportedly always complied with the following items a maximum of 30% of the time. These items therefore appear to pose the most difficulty for rural cooperatives.

1. Regular educators are prepared to handle special education students placed in the regular classroom (6%).

2. Regular educators take responsibility for special education students placed in their classrooms (16%).

3. Teachers who refer students for special education services are given suggestions to help accommodate these students (19%).

4. Assessments are completed within the time limit specified by PL94-142 (20%).

5. Evaluation personnel attend the IEP review meeting (26%).

6. Inservice programs on special education procedures are provided for regular educators (26%).

7. Special educators know special education laws (28%).

8. Classroom alternatives are tried before a student is referred for special education services (30%).

9. Parents attend IEP meetings (30%).

Compliance Scales

Seven scales were constructed to determine compliance with PL94-142 mandates. These scales are:

1. assessment of students referred for special services;
2. placement of students in need of special education services;
3. programming for students in need of special services;
4. teacher knowledge related to special education;
5. administrator knowledge related to special education;
6. in-service regarding special education;
7. general compliance.

Reliability assessments using Cronbach's Alpha were performed on each of the seven scales (see Table 1).

Table 1
Scale Reliability

Scale	Alpha	Standardized Item Alpha
Assessment	.71	.74
Placement	.73	.74
Programming	.78	.79
Teacher Knowledge	.71	.71
Admin. Knowledge	.82	.83
In-service	.77	.77
General Compliance	.85	.85

Results

Of the 157 rural cooperative directors surveyed, 135 (86%) usable responses were received. One person refused to complete the questionnaire. Another person had retired and the position had not been filled. (This information was sent by a person in the agency who had previously completed the questionnaire). Twenty directors failed to return the questionnaire. Of the 135 completed questionnaires, six respondents indicated they represented individual school districts and were eliminated from data analysis procedures. By states within regions, the sample population of usuable responses is displayed in Table 2.

Table 2
Responding Cooperatives

Region IV				Region V			
State	Eligible Respondents	Responses Received	%	State	Eligible Respondents	Responses Received	%
Alabama	1	1	100	Illinois	21	16	76
Georgia	13	12	92	Indiana	19	19	100
Kentucky	12	12	100	Michigan	21	18	86
Tennessee	1	1	100	Minnesota	35	30	86
				Ohio	7	6	86
				Wisconsin	20	14	70
Totals	27	26	96		123	103	87

Types of Cooperative Arrangements

The most frequently reported cooperative in the regions surveyed was the joint agreement cooperative that provides regional special education services while administrative authority remains with the local school district. Voluntary cooperatives where administrative authority is granted by member school districts to a new administrative unit were also popular. This survey did not discover any school study councils. Satellite cooperatives, where one district assumes authority for programs provided by neighboring school districts, were rarely reported. Regional state agencies, where administrative authority rests with the State Department of Education, were also scarce (see Table 3).

Table 3
Cooperative Arrangements Reported

Agency	Absolute Frequency	Relative Frequency
Regional State Agency	2	2%
Intermediate District	23	18%
Mandated Regional Agency	9	7%
Special School District	7	4%
Voluntary Cooperative	32	25%
Joint Agreement Cooperative	49	38%
Satellite Cooperative	5	4%
Unspecified	2	2%
Totals	129	100%

Size of Cooperatives

Rural cooperatives show a wide degree of variation on several size dimensions including geographical area served, number of school districts served, and number of students served. A rural cooperative may serve a geographic area covering as few as 13 or as many as 16,000 square miles. It may serve as few as 2 or as many as 115 school districts. A cooperative may also serve as few as 50 or as many as 180,000 students. For data analysis, each size attribute was grouped into three categories; small, medium and large (see Table 4).

Table 4
Size Categories

Attribute	Small		Medium		Large	
	No.	%	No.	%	No.	%
Geographical Size	, 851	34%	851-2000	33%	¢ 2000	33%
Districts	, 7	34%	7- 12	33%	¢ 12	33%
Students	,8001	37%	8001-1500	32%	¢15000	31%

Relationships

An examination of the relationship between type of cooperative arrangement and each of the seven scales revealed chi square values ranging ranging from 1.62 with a significance level of .95 for the programming scale to 9.31 with a significance level of .16 for the placement scale (see Table 5). No significant relationships emerged between type of cooperative arrangement and any of the compliance scales.

Table 5
Cooperative Arrangement by Scales

Scale	Chi Square	Significance
Assessment	4.06	.67
Placement	9.31	.16
Programming	1.62	.95
Teacher Knowledge	7.72	.26
Admin. Knowledge	8.74	.19
In-service	5.84	.44
General Compliance	8.01	.24

An investigation of the relationship between geographic area and each of the seven compliance scales ensued (see Table 6). In these analyses, chi square ranged from 2.61 with a significance level of .86 to 18.86 with a significance level of less than .01. Significant relationships emerged between geographic area served by the cooperative and both the assessment and placement scales. Further examination of the data revealed that for both of these scales large (¢ 2000 sq. mi.) cooperatives reported the greatest degree of compliance while medium sized (851-2000 sq. mi.) cooperatives revealed the most difficulty.

Table 6

Geographic Size by Scales

Scale	Chi Square	Significance
Assessment	13.89	.03*
Placement	18.86	,.01*
Programming	3.36	.75
Teacher Knowledge	10.18	.10
Admin. Knowledge	5.53	.48
In-service	2.51	.86
General Compliance	7.78	.25

X2(6, N=129)=12.59, p,.05

An analysis of the number of school districts served and each of the seven scales followed (See Table 7). Chi square ranged from 4.02 with a .67 significance level to 11.09 with a .09 signifcance level. No significant relationships emerged between number of school districts served and any of the compliance scales.

Table 7

School Districts by Scales

Scale	Chi Square	Significance
Assessment	8.76	.19
Placement	4.06	.67
Programming	5.06	.54
Teacher Knowledge	11.10	.09
Admin. Knowledge	4.91	.56
In-service	10.20	.12
General Compliance	4.02	.67

X2(6, N=129)=12.59,p .05

Next, an examination of the relationship between number of students served and each of the seven scales was conducted (See Table 8). In these analyses, chi square ranged from .93 with a .99 significance level to 10.42 with a .11 significance level. Significant relationships failed to emerge between number of students served by the cooperative and compliance with PL94-142.

Table 8
Students by Scales

Scale	Chi Square	Significance
Assessment	6.20	.40
Placement	10.47	.11
Programming	8.23	.27
Teacher Knowledge	4.43	.62
Admin. Knowledge	2.69	.85
In-service	.93	.99
General Compliance	5.20	.52

X2(6, N=129)=12.59, *p*,.05

Discussion

The PL94-142 mandates that prove least difficult for the rural cooperatives surveyed can be divided into three categories; parental rights, assessment issues, and the Individual Education Plan (IEP). Each of these catgories will be discussed.

Rural school districts apparently have little difficulty obtaining parental permission to assess students referred for special education services. Survey respondents also reported little difficulty obtaining permission to place students in special education programs. These findings coincide with a study conducted by the Stanford Research Institute (Write, 1982) and may result from the preliminary emphasis and institutionalization of PL94-142 procedural requirements or the existence of adequate due process procedures. Parents may also accept school district decisions without question. This is not surprising in view of traditional rural values that afford the school and its personnel a highly respected place in the community. This may make it difficult for some parents to question the school's decisions. Furthermore, despite the provision of the law requiring that parents be informed of their rights, parents may not understand these rights. This occurs because parents are often provided a paper listing the rights specified by PL94-142. Moreover, parental permission may be obtained via the mail further limiting the opportunity to clarify questions.

Compliance with items concerning assessment of students referred for special education services proved remarkably easy despite difficulties recruiting and retaining qualified personnl. Thus, the means of providing adequate special education assessments do exist. One explanation for compliance with issues regarding student assessment is the use of community service personnel or services located at some distance from the local school. While such arrangements may preclude the provision of services on a regular basis, they may be sufficient to provide the assessments needed.

It is important to note that student assessments did not occur within the time limit specified by PL94-142. This may be due to variations between state and federal timelines or the existence of assessment backlogs (Write, 1982).

Assessing students in their native language did not pose a problem for the cooperatives surveyed. As several respondents indicated, this issue had rarely arisen due to an absence of non-English speaking students.

Child Find activities were reported frequently by survey respondents. This coincides with the Stanford Reasearch Institute's findings. People in rural communities tend to know each other making handicapped children readily identifiable. Furthermore, due to scarce resources and rural tradition, public agencies tend to work together. This enhances the Child Find process.

Most IEPs reportedly contain all required components. It is reasonable to assume that the use of state or regional forms account for the high degree of compliance. Moreover, the specificity of the law, the emphasis on procedural requirements, and the state and federal monitoring procedures that regularly occur may assist compliance.

IEP reviews generally occur on a yearly basis as specified by law. Within the regions studied, the special education teacher usually attends these meetings. Since a small number of students receive special education services, it is relatively easy for special educators to keep track of student needs and attend the review meetings.

The federal mandates that proved most difficult for the rural cooperatives surveyed were: issues related to personnel knowlege regarding special education; the timelines specified by the law (discussed previously); and, parental attendance at IEP meetings.

From the results of this survey, regular educators appear either unwilling or unable to work with handicapped children in the regular classroom. One possible explanation is the lack of suggestions given to regular educators who refer students for special education services. Another possible explanation is the lack of inservice education provided to regular educators regarding special education. Write (p 127) states that "continually pushing inservice training aside seems to pose an impediment to the successful implementation of PL94-142." Moreover, most of the inservice that has been conducted has been procedural in nature.

Parental attendance at IEP meetings may be low because of distance factors. Considerable distance from the child's school due to sparse population, school district consolidation, and regional programs coupled with additional commitments (i.e. family, work, etc.) may preclude parental attendance at the scheduled meetings. Although the law does specify that meetings be held at mutually agreeable times, parents may not request an alternate time due to a lack of knowledge of their legal rights or their willingness to abide by the school's decisions.

In rural areas of Federal Education Regions IV and V, the joint agreement cooperative is the most frequently used cooperative for special education services. One reason for the popularity of this model is the retention of administrative authority by the member school districts. Maintenance of authority enhances local ownership of cooperative programs and protects local autonomy.

Joint agreement cooperatives are not delegated authority by member districts. This can lead to unclear lines of responsibility and competition rather than cooperation among member school districts. The lack of administrative authority also makes it difficult to attract and retain qualified leaders. Without strong leadership, mission clarity and ongoing planning are hampered. Because funding is based on allocations from member districts, if even one district decides it does not want a specific service, the entire program may be jeopardized. Thus, despite its popularity, the joint agreement cooperative may not be the most effective arrangement for special education services in rural areas.

If the type of cooperative arrrangement is not mandated, various arrangements should be investigated prior to selection. In deciding the type of arrangement to employ, attention should be given to each of the components needed for a successful cooperative. Because delegation of authority is essential, arrangements such as the voluntary cooperative or the satellite cooperative are advised.

By definition, the voluntary cooperative is delegated administrative authority by its constituents. The cooperative then assumes responsibility for special education programs. The structure of the voluntary cooperative maintains local ownership of programs while fostering a spirit of cooperation. This should lead to the appropriation of adequate resources. In addition, a governing board, usually comprised of local school personnel, enhaences mission clarity, ongoing planning, and clear lines of authority while providing the leadership to maintain cooperative efficacy. Thus, voluntary cooperatives can possess all the components deemed necessary for a successful rural cooperative.

The satellite cooperative also has the potential to provide the requisite components. The satelite cooperative involves a confederation of neighboring school districts with administrative authority delegated to a designated district that assumes administrative responsibility for all special education programs provided by member school districts. It also provides the leadership needed for cooperative success.

The structure of the satellite cooperative maintains local autonomy and ownership of special education programs while fostering a cooperative spirit. Representatives of participating districts meet regularly to assure ongoing planning, mission clarity, and clear lines of responsibility. It must be noted that, by definition, satellite cooperatives are limited to proximate school districts. Given school district consolidation, this configuration is becoming increasingly rare making the satellite cooperative unfeasible in many areas.

In the regions surveyed, cooperatives serving the largest geographic areas (¢ 2000 sq. mi.) reported the greatest degree of compliance with mandates related to assessment and placement of students referred for special education services. Cooperatives serving the smallest geographic areas (, 851 sq. mi.) reported greater compliance than medium sized cooperatives (851-2000 sq. mi.). This may result from the larger service area generating a greater fiscal base with which to provide services. It may also result from the use of alternative personnel and agencies to assess students. Compliance with mandates concerning assessment enhances compliance with mandates concerning placement as adequate assessments are needed before children can receive special education services. Furthermore, evaluation personnel may facilitate the placement process.

Despite these findings, respondents frequently cited large geographic distances as hampering the provision of special education services. Respondents commented that transportation difficulties resulting from large geographic distances inhibit the provision of quality special education programs. The time relegated to travel for both students and staff was cited. It should be noted that transportation costs may totally negate the cost efficiency of cooperative programs (Sher, 1977). Moreover, because smaller cooperatives enhance local program ownership, it is recommended that geographic area, number of school districts served, and number of students served should be limited.

Policy Implications

This survey raises several issues that have implications for both teacher training programs and state legislatures. The implications for each of these agencies will be discussed.

Teacher Training Programs. This survey indicates that school personnel lack knowledge regarding special education. Thus, both pre-service and inservice training programs for regular educators should include a greater emphasis on the handicapped child in the regular classroom. This training should include a series of courses that encompass:

1. information concerning a variety of handicapping conditions;
2. the legal mandates and their ramifications for the classroom teacher;
3. methods of modifying the classroom to accomodate handicapped children; and,
4. practical experiences.

This training should be retroactive (required of all teachers currently in the field as well as those in training). It should also be conducted at the local school district level to assure applicability and transfer of skills learned.

Rural special educators are often responsible for the entire special education program. Current teacher training programs do not prepare the future special educator to assume this role and the accompanying responsibilities. Thus, rural special education training programs should include a series of courses that:

1. familiarize students with all aspects of PL94-142 ;
2. teach administrative skills including: policy, program, and curriculum development and implementation
3. prepare special educators to consult with regular educators regarding the placement of handicapped children including procedures for modifying the classroom environment and adapting teaching materials and methodology;
4. teach consultation skills for working with parents, administrators, and other agencies; and,
5. provide assessment skills, including the ability to: conduct formal and informal assessments; understand a variety of assessment reports; and translate assessment data into educational programs.

With this training, special educators should be able to assume the roles and responsibilities demanded of the rural special education teacher.

While this survey shows that administrators have better knowledge regarding special education than do teachers, many lack an understanding of special education laws and procedures. Because principals often have responsibility for their building's special education programs, all rural administrators should have training in:

1. special education laws, requirements, and procedures;
2. the implications of these procedures at the building level; and,
3. special education policy development.

Personnel considerations were frequently cited as posing difficulties for rural special education cooperatives. Inability to attract qualified staff was mentioned by many respondents. This is not surprising as Helge (1983) found that 66% of the districts surveyed used emergency credentials to meet special education staffing needs.

Frequent staff turnover also poses problems for rural cooperatives. Helge reports an attrition rate of 30-50% among rural special educators. Teacher training institutions must therefore institute programs that train special educators to serve in rural areas. These programs should:

1. actively recruit students from rural areas;
2. familiarize students with rural special education;
3. include extensive rural internships;
4. provide special educators with generalizable, non-categorical skills that will enable them to work with a variety of handicapping conditions;
5. train students to develop community resources;
6. enable students to serve as their own resources; and,
6. provide follow-up assistance for rural special educators during their first year of teaching.

These types of programs are imperative because when special educators are trained specifically for service in rural areas, turnover rates diminish (Helge, 1984a).

State Legislature. Given the above recommendations for changes in teacher training programs, state licensure requirements should be monitored or reformulated to assure that both regular and special educators have both the skills and knowledge necessary to provide quality programs to handicapped children residing in rural areas. Moreover, given the sparse population base and large distances inherent in rural areas as well as the difficulties recruiting and retaining qualified personnel, it is imperative that states modify their teacher certification procedures to meet the needs of rural areas. Non-categorical certification that allows special educators to work with children having a variety of handicapping conditions has been successfully implemented in several states. This type of certification would enable more children to be served appropriately in their home school.

Another policy issue for state legislatures, funding, arises from respondent comments. Many respondents indicated that funding inadequacies led to service delivery problems. This occurs because the nature of rural areas increases the cost of special education services making current reimbursements inadequate to provide a free appropriate public education to all handicapped children.

Respondents also commented concerning a lack of funds to provide services to students with low-incidence handicapping conditions. These programs are expensive because of the students' needs. Moreover, by definition, these types of handicaps occur infrequently making it unlikely that a rural school district will have more than one or two children with a specific condition.

A lack of funds to attract qualified personnel was also cited as hampering quality special education programs. Survey respondents commented that the teacher salaries offered by rural school districts are not competitive with their urban counterparts making it difficult to hire needed personnel.

It is imperative that state legislatures recognize the additional costs associated with special education services in sparsely populated areas. Weighted funding formulas that recognize the additional costs incurred by rural school districts should be implemented (Sher, 1977). Only then will equity of service be achieved.

Summary and Conclusions

This study investigated cooperative arrangements for special education services in rural areas. Of the cooperatives surveyed, the joint agreement cooperative was used most frequently. Type of cooperative arrangement did not effect compliance with PL94-142 mandates.

Size did play a role in cooperative efficacy. Cooperatives serving the largest geographic areas (¢ 2000 sq. mi.) reported the greatest compliance with assessment and placement of handicapped children. However, respondents cited distance as hampering the provision of special education services. Thus, geographic area, number of school districts and number of students served by the cooperative should be limited when feasible.

This study also delineated several policy issues concerning the provision of quality special education programs in rural areas. First, teacher training institutions need to alter their preparation programs for both regular and special educators. All programs preparing educators to serve in rural areas should include:

1. familiarity with special education laws and procedures;
2. ability to modify the curriculum to accomodate handicapped learners;
3. specialized training concerning education in rural areas; and,
4. generalizable non-categorical special education skills.

Second, teacher certification boards should examine their teaching license requirements. To provide appropriate programs for all handicapped children, every regular educator needs to be familiar with a variety of handicapping conditions. Regular educators must also be able to accomodate the needs of handicapped children within the regular classroom. Moreover, special educators need to be knowledgeable concerning state and federal special education requirements. In addition, states that do not currently have rural or non-categorical special education certification should institute these types of teaching licenses. Only when the above conditions are met will rural school districts be able to hire adequately trained teachers and provide appropriate programs for the handicapped children they serve.

Third, the legislature needs to alter its funding formulas. These formulas need to be sensitive to the increased service costs experienced by rural school districts in the education of handicapped children. Only when adequate funds are available will equity of services be provided to all children throughout the nation.

Finally, further study of these issues is warranted to determine if the results of this study are representative of the country as a whole. This information would be useful for rural policy development and would enhance the provision of special education services to handicapped children residing in rural areas.

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Paulette E. Mills
Amy Schlater
University of Washington
Seattle, WA. 98195

The CAP Project: Using Computers to Serve Young Handicapped Children and Their Families in Their Natural Environments

The Computer-Assisted Program (CAP) Project is an alternative intervention approach for young (ages 0-3 years) handicapped children and their families. The project combines computer technology and professional expertise to meet the needs of families without access to local early intervention programs. Many of these families live in rural or isolated areas, and lack access to either educational services for their young child or support services for themselves. CAP serves these families through the mail and phone calls. Parents assess their child. These results are matched to developmentally appropriate activities through a computer program. A home activity package is then sent to the family. Children are reassessed and new activities are sent to the family. Children are reassessed and new activities are sent to parents at 3-month intervals.

Since we presented this program at the ACRES conference in Tucson, AZ last year, many modifications have been made in the program. The software for the program is now completed for adaptation by other programs and ready to be demonstrated on any IBM compatible machine. There was much interest in this possibility last year and we continue to receive many inquiries; especially from rural communities.

In our presentation we will outline the various aspects of the program. This will include information about the development of the model, brief summary of the research, information about how to establish the program in a rural area and a demonstration of the computer software.

The CAP Project relies on parents as data sources for regular child assessments. This feature is of growing interest to professionals. We will describe our assessment procedures and then follow that up with a demonstration of how to enter the information into the computer and select activities for the family. We will also provide information on the skills necessary to operate the program and how to utilize the program evaluation features: generating reports on child progress individually and as a group utilizing several different dimensions (e.g. by handicapping condition, age) and monitoring of the amount of professional involvement with each of the families. This program also has the capability of storing and generating mailing lists for families.

This presentation will address several issues of current interest in the field of early childhood special education: the viability of parent assessment procedures, the need for ecologically valid and supportive educational interventions, and the use of cost effective computer technology in the intervention efforts in the field.

This program would be of interest to:
Early Intervention & Enrichment
Family-Professional Relationships
Technology

PRESENTORS

DR. LINDA F. PEARL

DR. MARIE J. WELSCH

/

PROGRAM TITLE

Enhancing the Capacity of Physicians, Nurses and Social Workers to Provide Related Services to Newborn and Infant Handicapped Children in Rural Mountain Communities

Topical Area: Innovative Preservice Programs

This presentation will focus on a preservice training model designed to enhance future physicians, nurses and social worker's knowledge of the characteristics and needs of delayed infants and toddlers. The project is run by The Center for Early Childhood Learning and Development at East Tennessee State University and funded by the Department of Education: Special Education and Rehabilitation Services Division.

In the field of early childhood special education, there is strong evidence that the preschool years are most critical in a child's growth and development. Inadequate or inappropriate stimulation during the first months of life is detrimental to the development of any child. Early identification and intervention in the form of comprehensive services has shown profound positive impact on the development of young delayed children. Provision of such services depends on the collaborative abilities of many related service providers. Frequently, a young delayed child will have problems which require nursing and medical services. Often families with young delayed children require social work services (including in-hospital family counseling, discharge service planning, community referral, etc.).

Unfortunatly, few preservice training programs in the fields of medicine, nursing, or social work include information on intervention with young delayed children. Consequently, these professionals enter their disciplines with little knowledge regarding the educational, diagnostic, and therapeutic needs of these children. This makes interdisciplinary referral sporatic at best and collaboration difficult. Clearly, there exists a need to develop training programs for professionals which will prepare them to play a vital role in early identification and early intervention for handicapped infants and toddlers.

The purpose of this presentation will be to share an innovative preservice training program which provides future professionals with the information which will enable them to become advocates for their delayed clients and collaborators in the comprehensive interventions designed for these young children. Because of East Tennessee State University's location in the rural appalachian area, most of the graduates from these programs live and work in rural areas. Issues related to the provision of support services in rural areas must be addressed within the special training component that this project has designed. In addition, the presentation will outline specific ways and methods to:

(1) provide related professionals with appropriate special education factual knowledge;

(2) improve attitudes of related professionals toward handicapped children;

(3) increasae the awareness and sensitivity of related professionals to the family dynamics regarding the birth and early development of a handicapped child;

(4) provide and improve the communication and counseling skills of related professionals to prepare them for working with parents of handicapped children;

(5) enhance the recognition of normal development and the identification of abnormal development;

(6) increase the related professional's awareness and understanding of community treatment resources for referral purposes; and

(7) provide experience and insight for related professionals into the roles played by various professionals in a multidisciplinary team approach to intervention.

Joan Brinckerhoff
Portage Project
Portage, WI 53901

EARLY INTERVENTION

With the advent of P. L. 99-457, states will be gearing up to develop comprehensive services for young children with handicaps and their families. Meeting the needs of young children and families in rural areas imposes additional challenges. Project LIFT, Linking Infants and Families Together, has recently been funded by Handicapped Children's Early Education Program (HCEEP) to develop a model service delivery system for children with severe/multiple handicaps in south central Wisconsin. In order to meet the intense needs of infants and toddlers and the diverse needs of families within a rural area, Project LIFT has established a modified transdisciplinary model.

The nodified transdisciplinary model utilizes a case management system that would meet or exceed the mandates in P. L. 99-457. The case management system is also tied to both a community needs assessment and a family needs assessment. Information from the needs assessments is used to specify the services provided in the Individualized Family Service Plan, IFSP. The IFSP delineates the services and the method of delivery based on the transdisiplinary model.

The model for intervention is focused on caregiver/child interaction. The three infant/toddler components are: responsive play, making things happen and functional abilities. The four family components are: adjustment, routines and family functions, social supports, and knowledge and use of community resources.

This presentation will share the benefits of a modified transdisciplinary model and the barriers encountered during the initial stages. An overview of the Project LIFT components will be shared. The majority of time will be spent discussing how the transdisciplinary team translates IFSP goals and objectives into a comprehensive service model. The specific steps related to establishing a case management system and tying that system to child and community needs and resources will be demonstrated.

CONCURRENT SESSIONS

TUESDAY, MARCH 17, 1987

3:00 - 4:30 PM

Lynda L. Pletcher
Coordinator - Project SHARE
Family Infant & Preschool Prgm.
Morganton, N.C.

PROJECT ABSTRACT
ACRES Conference

A SHaRing Approach: Helping Parents Become More Involved In Their Child's Education

Description

Many professionals recognize the needs families have and wish they could do something to help. Special educators and administrators often comment that parents of special needs young children are not capable in carrying out educational goals in the home. In reality these families may be so overwhelmed with basic unmet material and emotional needs for the whole family that they cannot focus attention on the educational needs of one child. Meeting needs for products, services, and support is not the usual role of the special education classroom teacher or the early childhood interventionist. Project SHaRE is a program that could help both families and special educators.

Project SHaRE (Sources of Help Received and Exchanged) is a family support program of the Family, Infant and Preschool Program located in rural Western North Carolina. SHaRE is utilizing one of the oldest practices of helping families meet needs called "reciprocity". Simply put this means receiving and giving help. SHaRE members form a unique community partnership that functions as an informal support network. This network consists of 80 families and individuals half of whom are caring for a disabled family member in the home. SHaRE members discover that they have a wide variety of strengths, products and services they can exchange with others in order to secure the goods, services and products they in turn need. The SHaRE progam could be easily replicated in rural school districts by churches, parent groups, or civic clubs.

The major benefit for families in participating in Project SHARE is the identification of their needs and the resources to meet these needs. Participation in the SHaRE exchange network continually creates opportunities for families to become more competent, independent and self-sustaining at problem solving and getting their own needs met.

The major benefit to professionals is that families learn "how" to meet their own needs using the practice of reciprocity and thus become less dependent on "formal helpers". Families who have fewer unmet basic material and emotional needs may experience less stress and be in a better position to help plan and carry out realistic educational goals for the special needs child at home.

Expected outcomes for participants

1. Participants will have a clearer understanding of the role of formal and informal support; unmet needs and the relationship of these needs to family stress.

2. Participants will receive information about the SHaRE model and methods that can help families build informal networks of support, meet basic needs and leave families more competent and independent.

3. Participants will discuss the application of the SHaRE model to fit their own professional situation and rural location.

Myra Howe
Alaska Department of Education
P.O. Box F
Juneau, AK 99811

Pete Biaggio
Nebraska Department of Education
301 Centennial Mall South
Box 94987
Lincoln, NE 68509

State Education Agency Issues and Problem Solving

The purpose of this session is to allow state education agency personnel the opportunity to interact with their colleagues from other states, especially regarding funding of special education and service delivery in rural areas.

The session begins with a discussion of methods of funding special education in Nebraska (90% of allowable excess cost) and Alaska (instructional units). Participants from other states are encouraged to discuss their state funding models.

The second topic of discussion is the provision of services to special education students in rural and rural remote areas. Nebraska, which uses an Educational Service Unit (ESU) model, has found that quality of services, and who receives services are affected by the funding method. In Alaska, services to remote, rural areas are provided by one state-funded agency which serves children with low incidence handicaps. Services for other special education students are provided or contracted by the school district. Again, participants are asked to share their service delivery models.

Finally, participants are asked to identify other trends and issues in their states.

7190S

Helping Low-Income, Rural Families with Their Young Exceptional Children

David F. Peters *
Jane W. Minor **
Patricia P. Williams **

There is a growing body of literature that describes the problems that exceptional families encounter with professionals and service agencies when trying to get services for their children. These problems are magnified in rural areas where service agencies are sparse and many exceptional families are low-income and have distinctive cultural backgrounds.

The Developmental Evaluation Center at Western Carolina University is located in the Blue Ridge and Smoky Mountain section of North Carolina. This geography, coupled with a distinctively rural Appalachian culture, has led to the development of diagnostic and treatment approaches that are tailored to the needs of this service population. In this presentation, these strategies designed for rural, low-income families will be discussed using didactic and video-tape formats.

A core element in any successful intervention with special families is the treatment alliance between parents and helping agents. This relationship implies that the family and clinician share a common definition of the problem. In this presentation, tactics for enhancing the treatment alliance between professionals and family members, such as "family joining" and "double description", will be discussed. A video tape of a low-income rural family will demonstrate the clinical effectiveness of these approaches.

A number of techniques have been used in eary intervention programs to encourage children's development within the family context. Yet these methods, in general, have not focused on enhancing the competencies needed by families to care for their exceptional children over a long period of time. In this presentation, a teaching method called participant modeling will be discussed. This technique is used not only to teach developmental activities to handicapped children, but also to help parents develop their competencies for dealing with their offspring. Video tapes again will be used to demonstrate the effectiveness of participant modeling for working with low-income families.

* Developmental Evaluation Center
Western Carolina University
Box 283
Murphy, N.C. 28906
704-837-7496

** Developmental Evaluation Center
Killian Annex
Western Carolina University
Cullowhee, N.C. 28723
704-227-7488

Topics: Early Intervention; Cross Cultural Services

Classroom-Based Inservice Training:

From Assessing Staff Needs To Evaluating Their Performance

R. A. McWilliam

Kathy T. Garwood

Janet Chamberlain

Project SUNRISE
Family, Infant and Preschool Program
Western Carolina Center
Morganton, North Carolina 28655

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R. A. McWilliam
Kathy T. Garwood
Janet Chamberlain
Project SUNRISE
300 Enola Road
Morganton, NC 28655

Classroom-Based Inservice Training:

From Assessing Staff Needs to Evaluating Their Performance

Traditional inservice training has focused on providing teachers with knowledge and increasing their awareness. For example, conferences, lectures, courses, seminars, and workshops can measurably increase staff knowledge, but do not measurably affect change in performance competencies (e.g., Blindert & Lawrence, 1977; Quiltich, 1975). Perrone (1976) has noted that problems with traditional inservice activities include the fact that they are too general, they are geared for groups rather than individuals, and they address perceived rather than actual needs. Traditional practices for changing staff performance, such as memoranda (Quiltich, 1975), in-service training (Blindert & Lawrence, 1977; Quiltich, 1975), and threats to fire (Pierce & Risley, 1974) have been proven unsuccessful in improving staff performance.

An alternative to traditional inservice is a classroom-based model of training. The specific methods of training include individualized needs assessment, on-site training, performance checklists as a mechanism for modeling and contingent feedback, and strategically timed follow-up visits on-site. A process for evaluation is also employed to assess changes in children, staff, and classroom environments. This model has been developed and implemented by Project SUNRISE (Systematic Use of Newly Researched Interventions by Special Educators), a training and technical assistance project of the Family, Infant and Preschool Program.

Needs Assessment

Both the Preschool Assessment of the Classroom Environment (PACE; McWilliam, et. al., 1985a) and Needs Evaluations for Educators of Developmentally Disabled Students (NEEDS; McWilliam et. al., 1985b) are used to determine the foci of training efforts with respect to those classroom components that will be implemented as part of either full or partial (component) replication. The NEEDS is completed by the staff of the program where replication training will occur. It is completed prior to the initial on-site visit as part of PHASE IV (Training for Replication--see Figure 1, Step 20).

The PACE is used as part of both full and partial replication to structure the organization of training efforts as well as identify those components of the classroom model that will be replicated. When used to replicate components within existing classrooms, administration of the scale includes three steps: (1) observation of the classroom environment, (2) an interview with the person(s) responsible for the overall management of the classroom, and (3) a review of written materials (e.g., IEPs). The classroom observation generally takes about 2 to 4 hours in order to sample adequately the full range of activities, events, and routines that constitute the "typical" classroom environment. The interview permits an assessment of the match between what is prescribed and what is actually occurring. All 70 items can be easily rated based upon completion of the three steps of administration.

The typical process involved in the use of the PACE for replication purposes occurs as follows. First, a self-evaluation of the classroom environment is completed by a teacher/caregiver requesting technical assistance concerning one or more aspects of the classroom environment. The self-evaluation is made using the NEEDS. The NEEDS includes the same 70 items that are on the PACE; the items, however, are stated in terms of the degree to which the teacher/caregiver would like help with improving one or more components of the classroom environment. Second, the PACE is completed by an independent observer in the manner described above. Third, the results from both the NEEDS and PACE are used to discuss what aspects of the environment are both conducive and nonconducive to optimal child functioning. Fourth, a replication plan is developed and implemented to reinforce and strengthen the program activities that are "working" and to change or improve components that are less than optimal. Fifth, changes in child behavior and functioning are monitored in relationship to changes in the environment in order to establish the effectiveness of the intervention procedures. This five-step process provides the structure for both developing and implementing proactive changes in the classroom ecology and determining the efficacy of the efforts.

On-Site Workshops

The results of the needs assessment process is used to identify the specific topics that will be covered as part of the on-site workshop. A modified version of the workshop model proposed by Jesien and Wolfe (1984) will be used to guide the implementation of the on-site workshops. The 12 steps will be used to guide the implementation of the on-site workshops. The 12 steps these investigators define as essential for a high quality workshop are:

1. Identify Model Components
2. Define Model Components
3. Gather Information
4. "Brainstorm" Training Content
5. Review Training Content
6. Develop Performance Objectives
7. Prepare Presentation Outline
8. Select Interest Elements
9. Carry Out a Needs Assessment
10. Develop an Agenda
11. Develop an Opening and a Closing
12. Evaluate the Workshop (p.2)

Project SUNRISE will have "prepackaged" modules that correspond to each model-demonstration classroom components for Steps 1, 2, and 6. Steps 3, 4, 5, and 7 will be carried out as part of PHASES III and IV of the Training for Replication process (see Figure 1). Steps 8 and 9 will be conducted as part of the administration of the PACE and NEEDS. Steps 10 and 11 will be conducted at the conclusion of the needs assessment process prior to the conduct of the on-site workshop. Step 12 will be conducted at the completion of the workshop using preselected criteria for assessing mastery of the content of the various module components.

On-Site Training

Once the specific components that will be replicated have been identified and the "knowledge-based" workshop has been conducted, the next step is to train staff to implement the components as part of replication. The same simple yet highly efficient method used to empower parents to operate Co-ops in a manner that results in high quality preschool programs will be used to train others to replicate the classroom-based model. Each of the 14 components of the model includes performance checklists that delineate the specific behaviors which constitute the elements of quality intervention. Checklists are no more than task-analyses and criterion-referenced measurement scales that detail the steps that staff follow in carrying out specified classroom activites (e.g., snack time). Performance checklists have been developed for the following activities: implementation of the classroom schedule (basic classroom routines), incidental teaching, transitions, fostering child-specific targeted behaviors (intervention routines), and discerning child progress toward mastering targets (behavior monitoring routines).

Training will occur in an "on-the-job" fashion using performance checklists as the principal mode of teaching staff to replicate the classroom component. Trainees are shown the steps operationally defined as high quality performance and they observe Project SUNRISE staff implementing the activity. A second Project SUNRISE staff member points out for the trainee the manner in which the staff member is implementing the activity. Each trainee is then provided the opportunity to implement the routine. Their performance provides a basis for reinforcing correct implementation of certain steps and providing feedback regarding how they can improve their ability to perform incorrectly implemented steps.

Performance checklists serve three major functions: (a) They define for the trainees what constitutes quality care (operationally defined as the mastery of the behaviors on the checklists), (b) they allow immediate feedback to be provided to trainees regarding how well they implemented the routine, and (c) they serve as measures of how well the components are being implemented as planned. Evidence from a number of studies indicate that high levels of performance are attained quite easily using this training method and maintained for longer periods of time (Favell, 1974; Herbert-Jackson et al., 1977; O'Brien et al., 1979; Sheppard, 1974) compared to more traditional methods of training. (See especially Figures 2 and 3 above for data collected as part of the Parent Co-op Project documenting the extent to which high performance levels are maintained.)

Follow-Up Training Sessions

Follow-up training sessions will be conducted one month, three months, and six months following the initial on-site training. The purposes of the follow-up visits will be to (a) assess the extent to which initial replication activities are still in place, (b) determine further training needs, and (c) conduct further on-site training for additional classroom-based components. Both the PACE and the NEEDS will be used as part of the follow-up procedure to attain these goals (see Evaluation subsection next). A "mini-version" of the On-Site Training process described above will be used to conduct the follow-up sessions.

Evaluation of Training

The focus of program evaluation is to determine the extent to which goals and objectives are met, how well planned activities are carried out, and how much impact inservice training activities have had on targeted audiences. The three major groups of individuals for whom training objectives and activities are developed consist of (a) direct service staff, (b) children with handicaps, and (c) parents of the handicapped children. The evaluation model employed by Project SUNRISE is that developed by Stufflebeam (1971), who defined four levels and types of evaluation: context, input, process, and product. Context evaluation includes both the identification of unmet needs and the delineation of goals and objectives to meet unmet needs. Input evaluation involves the identification of both strategies and approaches for meeting unmet needs, and the implementation of appropriate plans of action to meet identified needs. Process evaluation involves the monitoring of the implementation of plans of action and collecting data to determine when, how often, and the degree to which proposed activities were implemented as planned. Product evaluation is designed to assess the effectiveness of planned activities and, last and most difficult, to determine what factors or variables were responsible for the changes observed (Campbell & Stanley, 1966; Cook & Campbell, 1979).

Context and Input Evaluation

Project SUNRISE has accumulated evidence documenting the need for classroom-based inservice training in a five-state region consisting of North Carolina, South Carolina, Georgia, Virginia, and West Virginia. Almost 50 programs serving preschoolers with special needs have indicated interest and need for this type of training. Several other factors provide evidence that competency-based inservice training is needed in this largely rural area. First, North Carolina, has no university-based training program that educates students to work with handicapped infants and their families. Second, the North Carolina Department of Public Instruction does not yet have a certification category in the area of early childhood special education. Consequently, many service providers are not suitably qualified to provide optimal services. Third, services for preschool children with handicaps in Georgia have been based largely on a developmental therapy model for emotionally handicapped children only. Fourth, South Carolina has had no recent federally-funded projects to demonstrate model services or to provide outreach assistance. Fifth, technical assistance in Virginia has largely been conducted through consultations and not intensive training and follow-up. Sixth, West Virginia provides no statewide technical assistance for classrooms serving handicapped children, except for those with visual impairments.

The major goal to be evaluated in a classroom-based inservice training program is to provide on-site training to professionals, paraprofessionals, parents, and volunteers in order to stimulate the development of or improvement in services to preschoolers with handicaps and their families. Context evaluation includes the strategies determined to meet the unmet needs. Project SUNRISE has formulated five objectives:

1. To conduct needs assessment with 10 sites in order to determine the specific training activities to be implemented.

2. To conduct a half-day on-site workshop with the staff of the 10 sites to provide the site staff with the skills and competencies necessary to provide state-of-the-art services.

3. To conduct a 2 to 4 day on-site training program.

4. To conduct three 2-day on-site follow-up training sessions with the staff of each training site in order to provide additional training.
5. To conduct an evaluation of the extent to which the training activities have positive influences on staff, children, and parents.

Detailed documentation is provided of the extent to which the decisions made (to provide on-site training) meet the unmet need (inadequate preparation and support of site staff). The next evaluation effort (process evaluation) focuses on the extent to which program plans and activities have been implemented as planned and the extent to which goals, objectives, and outcomes have been attained.

Process Evaluation

Process evaluation typically involves assessing two types of impacts, administrative objectives and outcome objectives (Gallagher, Surles, & Hayes, 1973). Administrative objectives specify what is expected to occur and the extent to which activities are implemented. Outcome objectives specify what is expected to occur in terms of project participants, including staff, children, parents, and so on. An example of process evaluation efforts in an inservice training program is found in the Project SUNRISE impact indicators for on-site training:

- Number of programs trained.
- Number of staff members who are trained.
- Number of on-site workshops conducted.
- Number of follow-up training sessions.
- Number of individuals attending the on-site training sessions.
- Number of people attending the follow-up training sessions.
- Number of PACE and NEEDS scales administered.
- Number of unserved children who receive improved services as a result of training activities.
- Number of underserved children who receive improved services as a result of training activities.
- Number of children showing improvements in engagement levels at the follow-up visits.
- Number of children showing greater developmental progress at the follow-up visits.

These impact indicators provide data on the extent to which the administrative treatment variables (training activities) were in place as well as the impacts they had on process outcomes (e.g., numbers of children, staff members, and programs affected). The extent to which outcomes were favorable is measured as part of product evaluation.

Product Evaluation

The most difficult type of evaluation to conduct, particularly in mission-oriented programs such as a training program, is product evaluation. Product evaluation is designed to determine whether or not a program activity had the expected impact, and a determination of whether the program in fact caused the outcome observed. A number of techniques can be employed to determine the extent to which classroom-based inservice training affects changes in teaching personnel, children, and parents. Project SUNRISE has selected four types of product evaluation.

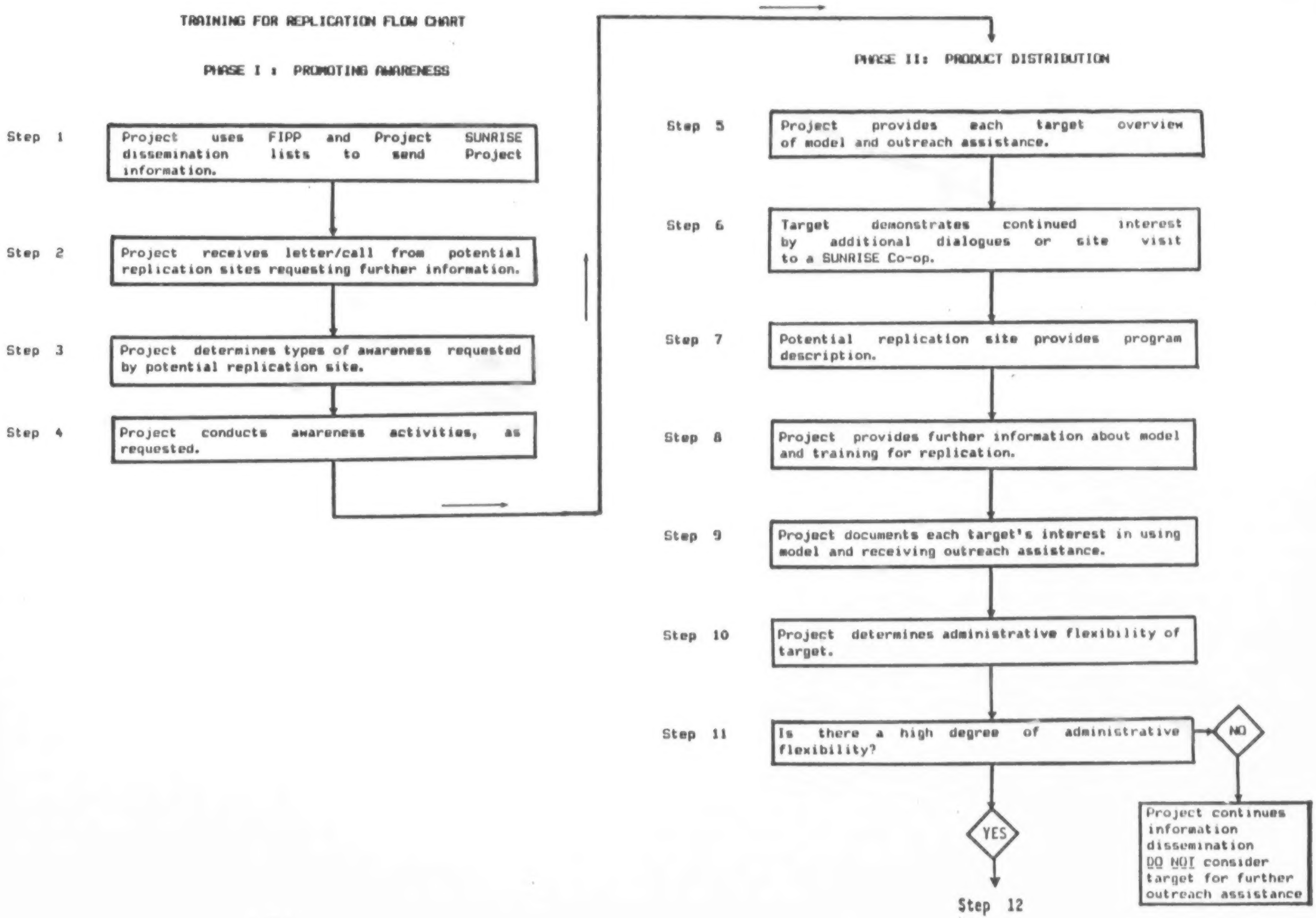
1. Classroom environment. The training staff assess changes on the PACE subscales across four observations (training plus three follow-up visits). For example, a Four Time Period x PACE Components ANOVA with PACE components blocked according to training versus nontraining components permits a test of changes resulting from inservice training.

2. Staff needs. The training site staff complete the NEEDS before any training occurs and after the final follow-up visit. These pretest-posttest data provide a test of the extent to which on-site training has had an impact on staff perceptions of their need for assistance.

3. Child outcomes. The training staff assess (a) changes in levels of child engagement across training/follow-up sessions and (b) changes in rates of child progress after training relative to pretraining rates of progress.

4. Parent perceptions. The extent to which competency-based training affects the parents' perceptions of improvement in the quality of services is assessed using a project-developed questionnaire. This questionnaire asks parents to rate the extent to which they have seen improvements in classroom organization and implementation.

These four types of product evaluation are not exhaustive, yet they address the major goals of classroom-based inservice training. Impacts on all three target audiences (teaching staff, children, parents) are measured, not only in numbers affected (process evaluation) but the extent to which they are affected (product evaluation). The systematic evaluation of any training program is most important, but especially so in one that eschews traditional modes (e.g., one-day workshops) in favor of innovative approaches. The empirical basis for competency-based, on-the-job training is relatively strong, but the application to rural early childhood special education still needs careful evaluation.


TRAINING FOR REPLICATION FLOW CHART
PHASE I : PROMOTING AWARENESS
PHASE II: PRODUCT DISTRIBUTION

Step 1 Project uses FIPP and Project SUNRISE dissemination lists to send Project information.

Step 2 Project receives letter/call from potential replication sites requesting further information.

Step 3 Project determines types of awareness requested by potential replication site.

Step 4 Project conducts awareness activities, as requested.

Step 5 Project provides each target overview of model and outreach assistance.

Step 6 Target demonstrates continued interest by additional dialogues or site visit to a SUNRISE Co-op.

Step 7 Potential replication site provides program description.

Step 8 Project provides further information about model and training for replication.

Step 9 Project documents each target's interest in using model and receiving outreach assistance.

Step 10 Project determines administrative flexibility of target.

Step 11 Is there a high degree of administrative flexibility?

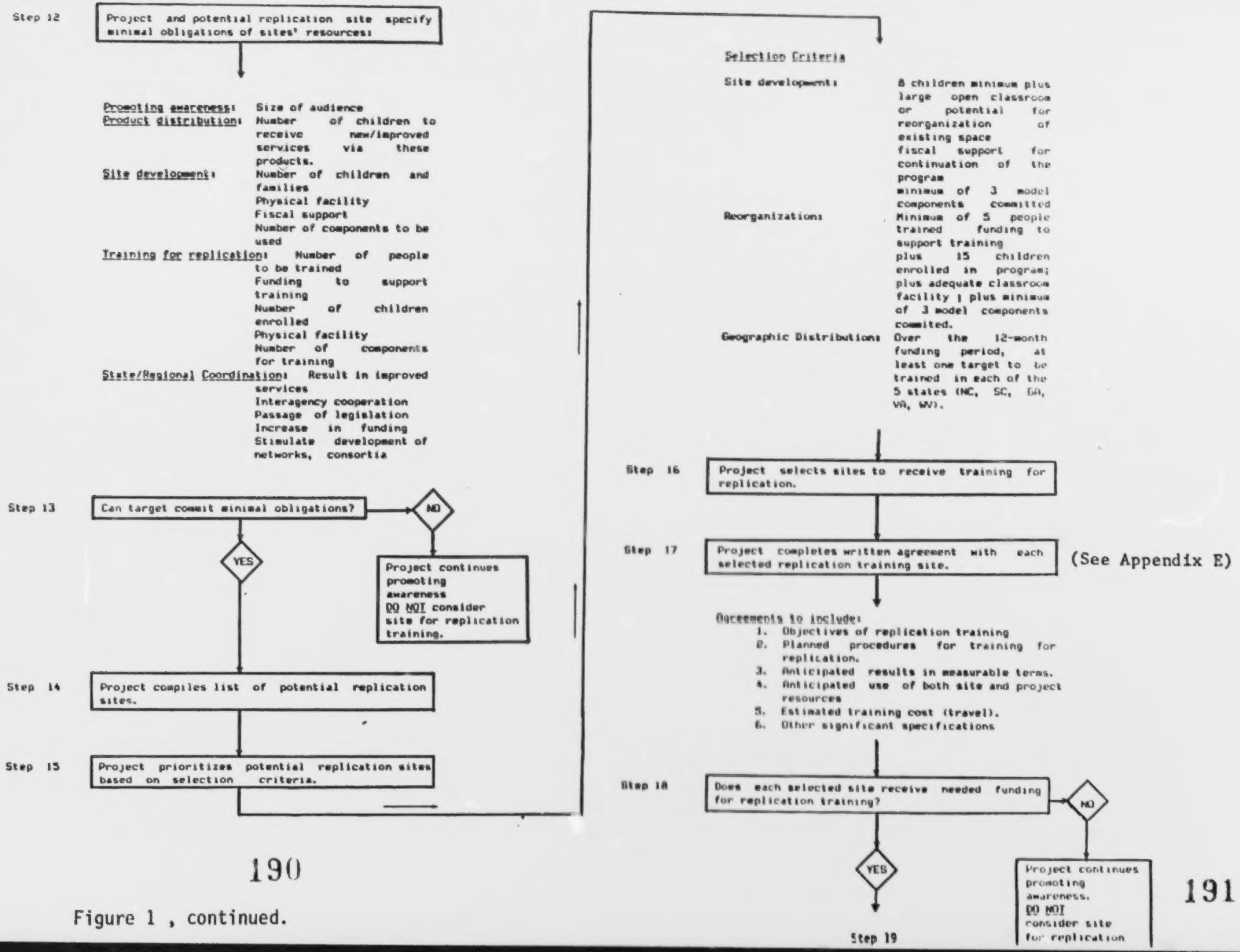
NO

Project continues information dissemination
DO NOT consider target for further outreach assistance

YES

Step 12

[illegible]gure 1 Flow chart of steps for engaging in rep[illegible]tion training.



Step 12 Project and potential replication site specify minimal obligations of sites' resources:

Promoting awareness: Size of audience
Product distribution: Number of children to receive new/improved services via these products.
Site development: Number of children and families
Physical facility
Fiscal support
Number of components to be used
Training for replication: Number of people to be trained
Funding to support training
Number of children enrolled
Physical facility
Number of components for training
State/Regional Coordination: Result in improved services
Interagency cooperation
Passage of legislation
Increase in funding
Stimulate development of networks, consortia

Step 13 Can target commit minimal obligations?

Project continues promoting awareness
DO NOT consider site for replication training.

Step 14 Project compiles list of potential replication sites.

Step 15 Project prioritizes potential replication sites based on selection criteria.

Selection Criteria

Site development: 8 children minimum plus large open classroom or potential for reorganization of existing space
fiscal support for continuation of the program
minimum of 3 model components committed
Reorganization: Minimum of 5 people trained funding to support training
plus 15 children enrolled in program; plus adequate classroom facility ; plus minimum of 3 model components commited.
Geographic Distribution: Over the 12-month funding period, at least one target to be trained in each of the 5 states (NC, SC, GA, VA, WV).

Step 16 Project selects sites to receive training for replication.

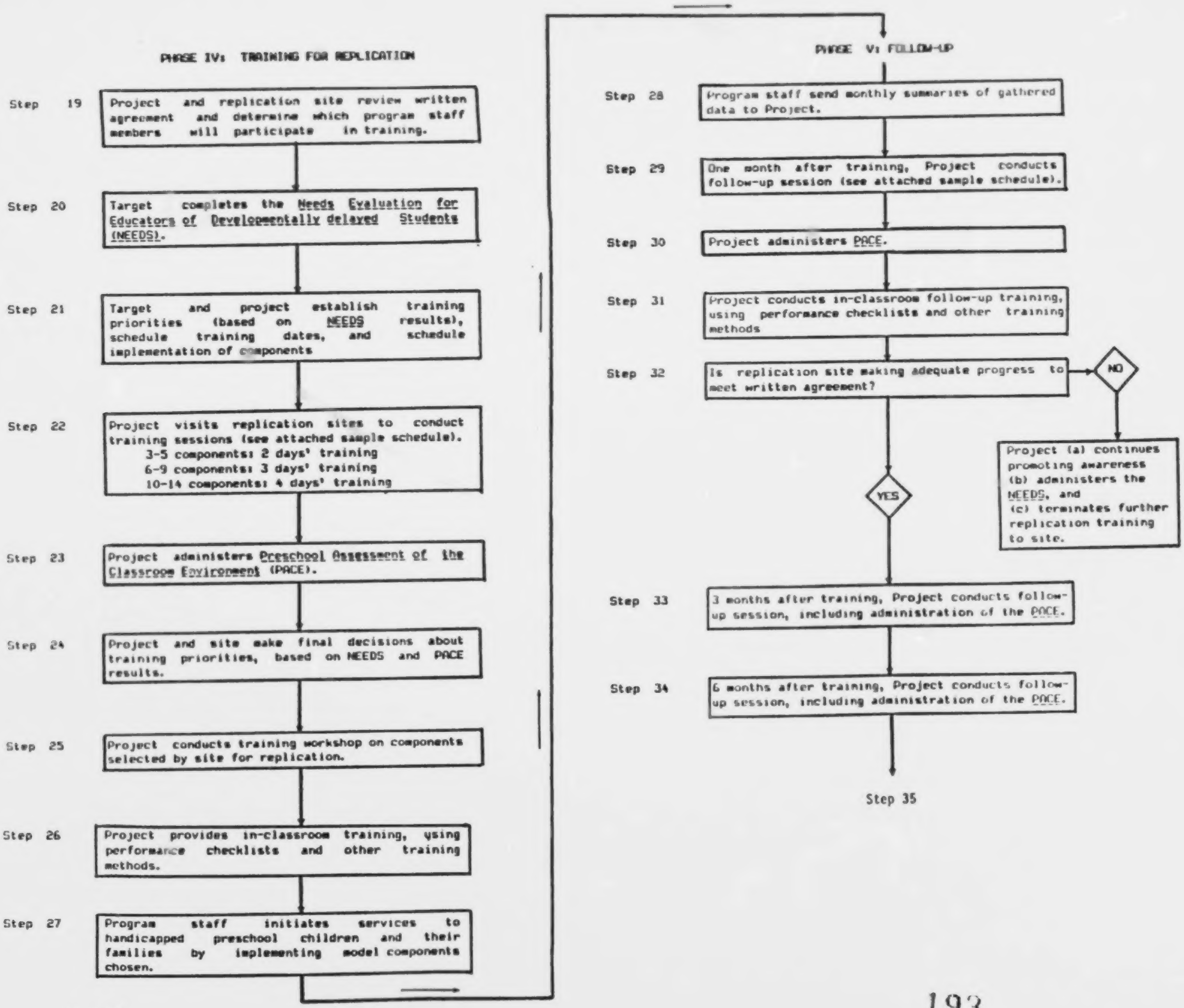
Step 17 Project completes written agreement with each selected replication training site. (See Appendix E)

Agreements to include:
1. Objectives of replication training
2. Planned procedures for training for replication.
3. Anticipated results in measurable terms.
4. Anticipated use of both site and project resources
5. Estimated training cost (travel).
6. Other significant specifications

Step 18 Does each selected site receive needed funding for replication training?

Project continues promoting awareness.
DO NOT consider site for replication

Figure 1 , continued.



PHASE IV: TRAINING FOR REPLICATION

Step 19 Project and replication site review written agreement and determine which program staff members will participate in training.

Step 20 Target completes the Needs Evaluation for Educators of Developmentally delayed Students (NEEDS).

Step 21 Target and project establish training priorities (based on NEEDS results), schedule training dates, and schedule implementation of components

Step 22 Project visits replication sites to conduct training sessions (see attached sample schedule).
3-5 components: 2 days' training
6-9 components: 3 days' training
10-14 components: 4 days' training

Step 23 Project administers Preschool Assessment of the Classroom Environment (PACE).

Step 24 Project and site make final decisions about training priorities, based on NEEDS and PACE results.

Step 25 Project conducts training workshop on components selected by site for replication.

Step 26 Project provides in-classroom training, using performance checklists and other training methods.

Step 27 Program staff initiates services to handicapped preschool children and their families by implementing model components chosen.

PHASE V: FOLLOW-UP

Step 28 Program staff send monthly summaries of gathered data to Project.

Step 29 One month after training, Project conducts follow-up session (see attached sample schedule).

Step 30 Project administers PACE.

Step 31 Project conducts in-classroom follow-up training, using performance checklists and other training methods

Step 32 Is replication site making adequate progress to meet written agreement?

NO

Project (a) continues promoting awareness (b) administers the NEEDS, and (c) terminates further replication training to site.

YES

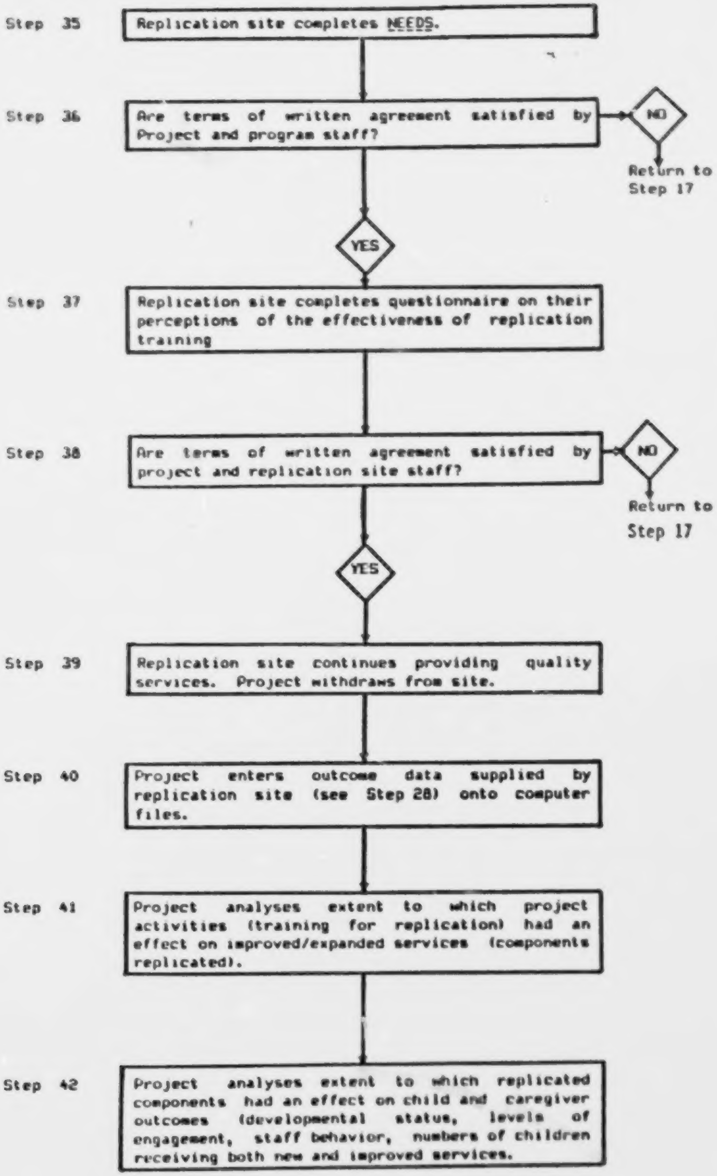
Step 33 3 months after training, Project conducts follow-up session, including administration of the PACE.

Step 34 6 months after training, Project conducts follow-up session, including administration of the PACE.

Step 35

Figure 1 , continued.

PHASE VI. PROGRAM EVALUATION



Step 35 Replication site completes NEEDS.

Step 36 Are terms of written agreement satisfied by Project and program staff?

Step 37 Replication site completes questionnaire on their perceptions of the effectiveness of replication training

Step 38 Are terms of written agreement satisfied by project and replication site staff?

Step 39 Replication site continues providing quality services. Project withdraws from site.

Step 40 Project enters outcome data supplied by replication site (see Step 28) onto computer files.

Step 41 Project analyses extent to which project activities (training for replication) had an effect on improved/expanded services (components replicated).

Step 42 Project analyses extent to which replicated components had an effect on child and caregiver outcomes (developmental status, levels of engagement, staff behavior, numbers of children receiving both new and improved services.

Figure 1 , continued.

Alma Watson Davis
Coordinator
Technical Assistance Center
Virginia Tech
234 University City Office Building
Blacksburg, VA 24061

Andrea Lazzari
Supervisor
Early Childhood Special Education
Virginia Department of Education
Box 6Q
Richmond, VA 23216-2060

DEVELOPMENT OF SERVICES IN EARLY CHILDHOOD SPECIAL EDUCATION IN RURAL COMMUNITIES

Rationale

Currently, an impressive research base applauds the effectiveness of early intervention services. Sustained efforts of advocates, parents and program developers have generated the necessary legislative support at the federal level for comprehensive services to become a reality nationwide. The enactment of the Education of the Handicapped Act Amendments of 1986, PL 99-457, will soon mandate the extension of special education services to the three-through-five-year-old handicapped child and will support increased planning efforts and program implementation for the birth through two population. Effective programming and refined intervention strategies have been developed by the Handicapped Children's Early Education Programs (HCEEP) and are now available for adoption and adaptation.

When attempting to develop or adapt effective early intervention programs in rural areas, it is important to consider the differences which exist in the rural communities (Burrello, 1979; Helge, 1984; Hutinger, 1981; Maars, 1984; Nachtigal, 1982). Helge (1983; 1984) has suggested that there are "givens that can be problematic" and "variables that can be manipulated" in arriving at an appropriate service delivery model in the rural community.

Overview of Presentation

The presenters will suggest that the solutions to service delivery in the rural areas are best made by planners who are innovative and who have the necessary leadership skills to maximize positive rural characteristics, while dealing with the well-known constraints. These leadership characteristics and rural service delivery issues outlined by Helge and other rural researchers will be introduced. The participants will be invited to generate problems encountered in their work settings. These problems and additional simulated problems that are encountered in rural communities will be explored for possible solutions or acceptable alternatives.

One type of problem-solving effort that has been effectively used when resources were at a premium is networking. Cooperative arrangements have been used to stretch limited human and financial resources. A logical sequence which leads to the effective use of cooperative and informal networking in a rural setting will be developed. Collaboration offers opportunities to save dollars by sharing knowledge, expertise, staff and programs. Collaboration which results in addressing the mutual needs across agencies also lessens the degree of resistance to change because it provides an avenue by which communities get together and talk about shared problems. Cooperative efforts which grow out of an informal, trusting approach will produce appropriate referrals, more program alternatives and better delivery systems, an accomplishment unrivaled by the more formal interagency agreement required in a more urban setting. This broad involvement increases ownership, accountability and commitment across all agencies.

Support to teachers in their day-to-day instructional roles is also an important issue in programming in rural communities. The role of a statewide system of regional Technical Assistance Centers (TACs) that has been successfully supporting Virginia's teachers for the last eight years will be discussed. These centers have been designed to take the necessary support and technical assistance to early intervention programs in the rural communities and to provide an avenue for networking with other personnel in the region and across the state. The centers provide teachers the free services that include needs assessments, on-site consultations, small group workshops, information and library services. Additionally, a monthly newsletter which provides current information on topics ranging from legal issues, to new materials reviews, to staff development and conference opportunities is provided to all preschool teachers, infant specialists, support personnel and administrators. These services have proven to be invaluable to rural preschool educators who serve the handicapped by assisting them in maintaining and upgrading their professional skills and by reducing the feeling of isolation which may result from being the only preschool professional in a large geographic area.

Wesley Brown
Linda Keller
Carolyn Overbay
Southern Appalachian Early
Intervention Program
Center for Early Childhood
Learning and Development
East Tennessee State University
Box 15,520A
Johnson City, Tennessee 37614

The Southern Appalachian Early Intervention Program: A Transdisciplinary, Regional, Rural Program to Serve Moderately and Severely Handicapped Children from Birth-to-Three-Years

Abstract

The Southern Appalachian Early Intervention Program (SAEIP) is funded by the Handicapped Children's Early Education Program and provides a rural, regional approach towards serving significantly handicapped infants and toddlers from birth. The program stresses medical linkages, family involvement and preparation for integrated settings. Other features include interagency developments and the integrated service delivery approaches being developed at the Center for Early Childhood Learning and Development at East Tennessee State University. The Center's related programs provide birth to six early childhood and special education programs that involve several local education agencies; programs for the State Departments of Health, Mental Health and Mental Retardation; and private day care and other agencies.

The purpose of this presentation at the 1987 National Rural Special Education Conference is to discuss the Southern Appalachian Early Intervention Program and present model components emphasizing interagency collaboration, diagnostic and monitoring services, and an aggressive outreach components targeted at isolated rural areas.

The conference presentation will focus on the components of the program which include: the rural outreach component; the coordination of services in rural, disadvantaged areas; the need for training and education for parents for such children. In addition, a detail overview of the program activities will be addressed. The activities to be presented and reviewed are: (1) the transdisciplinary approach in providing screening and assessment services to moderately and severely handicapped infants and children, (2) how to provide an individual developmental plan based on casefinding and performance on assessment procedures as related to home and family location and circumstances, (3) to present the education service delivery approach for moderately and severely handicapped zero-to-three-years-old through a Center based program, (4) ways to increase the availability of early diagnostic/prescriptial services and parent training for families living in remote rural communities, (5) approach for improving medical linkages for service programs.

This proposed presentation will also discuss the concept of the "Transdisciplinary Model" which involves the collaboration of professional from several disciplines (medical, educational, parents, developmental and clinical) in order to treat the child's problem comprehensively. Advantages and barriers to the model will be discussed at a systems level from the perspectives of medical, educational, and other agencies.

Preparation for Integration Through Interagency Efforts

Educational services to children and families of preschool handicapped students have been noted for fragmentation and gaps. While educational mandates and rapid growth have improved cooperative efforts for the older preschoolers, services for children from birth to three are still very limited and widely distributed. Concurrently, students who have success in integrated programs are unable to continue such gains after transitions to primary school services where limited integrative activities in their school programs exist.

Interagency models seek to improve services to children and families while solving service provider problems. The complexity of delivering birth to six services requires collaborative efforts to deal with the issues present and promote readiness for integrated program opportunities. For example family needs, multiple handicaps, and the complexity of medical and health care issues require multi-agency efforts including strong medical linkages including the provision of allied medical services in order to avoid restrictive educational or institutional placements. Individual agency providers are often limited with the range and availablity of specialized personnel, non-education support services, and information about other existing related services.

This paper for the proceedings accompanying this presentation will discuss interagency efforts and critical components that allow the provision of integrated services. Many of these points were originally presented at the Massachusetts State Department of Education's *Every Child is a Promise* Conference in 1986. This included a discussion of the advantages, barriers, rewards, and current models of interagency approaches. The paper will conclude with a presentation of features of the current programs at the Center for Early Childhood Learning and Development, East Tennessee State Univeristy.

Interagency Advantages. Collaborative models allow the responsibility for providing services to be shared by more than one agency or organization. Developing such a coalition requires major continuing efforts of the participants and often involves the formulation of written agreements. Such an approach can eliminate duplication of services while identifying service gaps and proving the need for new services. It can allow the reallocation of money and other resources for needed services, providing more prudent and effective uses of existing personnel and resources. Collaborative approaches allow comprehensive planning for future services and can build a larger base of support for programs.

Interagency Barriers. Interagency approaches face the competitiveness and protectism of long-established agencies. Many agencies lack experience working with other agency and have limited and specialized interests that do not always respond to broad community needs. There is often a failure to recognize that the responsibility for serving the handicapped can and should be shared by several agencies. Changes can be hard to effect because of differences in agency requirements and terminology. Finally, there may be resistance by staff due to the perception that more work will be generated and uncertainty about control and which services will be received by the child and family.

Rewards for Collaboration. While interagency collaborative approaches take a lot of commitment, they can lead to exemplary programs for young children with handicaps that provide opportunities far in excess of what any individual agency could offer. Collaborative efforts can provide critical links between programs that enable integrated opportunities that otherwise could not be provided to children because of the limited scope of individual agencies. The primary rewards then are qualitative for agencies, staff, children, and families. Better quality programs will lead to a better child outcomes in the future.

Current Model Approaches. There have been many models generated which work toward interagency cooperation. Most prominate are approaches creating state and local level planning groups whose members are drawn from the existing state agencies or local service providers. Focused on planning, communication, and formal agreements, these approaches leave local providers with many unresolved issues in the delivery of services. The Concurrent Services Model has been developed at the Child Development and Mental Retardation Center at the University of Washington in Seattle. This HCEEP funded demonstration grant works to assure coordinated services for students who are receiving services from more than one agency or service provider. The model uses strategies that focus on the current practices of adults working on behalf of handicapped children in agencies. The strategies are used to explore interagency issues in commonly established problem areas and establish local arrangements.

Many new models are being developed currently which include the rapidly developing network of neonatal intensive care facilities, high-risk follow-up clinics, state-wide high-risk registries, and the direct service providers for these children. Finally, approaches such as the Macomb Projects at the Western Illinois University have worked to create a rural networking system that focuses on the linkage between a university and rural service providers. Their approach relies on administrative committment, mutual cooperation and communication, sharing and exchanging services, developing trust, and using the existing skills of agency personnel.

Preparation from Birth. Our programs operate with the belief that success in integration can not be achieved with a series of changing, unrelated services, especially for significantly handicapped children. Integration from birth requires a shifting, sequenced programs based on individual agency strengths. The preschool years present children and families with a large number of transitions and limited support for achieving these transitions. Integrative activites can be far more effective if started before the age of three or four. Early preschool handicapped students need access to integrated and flexible placements so that they may later be prepared for integrated public school programs. Additionally, students who have succeeded in integrated preschool settings need accessible integrated primary settings to continue in educationally.

We feel that grass-roots collaboration at a program-to-program level can provide another model approach to flexible placements using individual agency strengths. Here, agencies work and plan together at the local levelwith a shared committment to services. The range of agencies should include normal child development agencies and day care providers, along with the traditional special service providers. It is ideal when these programs can share service facilities or locations to enhance integration opportunities and transitions between programs.

Essential Features. Phillip Strain, director of the Early Childhood Research Insititute at the University of Pittsburg has noted several features necessary to obtain strong, lasting effects from early intervention. Four of his findings have been critical features of our programming. The first feature is early timely services. Programs begin at the earliest possible time through involvment with the medical and health departments and their follow-up clinics in our communities. The second feature is strong family involvement and support. This requires a strong committment to families at the program level and the use of many different agency services (ie. respite care, developmental monitoring, etc.) The third feature is the use of a 'next environment criterion'. Current programming for a child and family must always be influenced by the realities of the next environment that child will enter. Without such attention, success in developing programs that will move students to the appropriate next setting is threatened. The final feature is the use of developmentally integrated settings. Without access to an integrated setting, children with handicaps have little opportunity to prepare for and succeed in such settings later as they grow.

The Center for Early Childhood Learning and Development. The Center was established as a Center of Excellence in Tennessee under the Comprehensive Educational Reform Act. It builds upon existing programs at East Tennessee State University by focusing on three balanced missions. First, model programs and services are offered to normal and handicapped children and their families. These services feature exemplary early childhood developmental practices, social integration, and medical linkage. One third of all students served have significant handicaps and all are integrated for activity centers and other specific program activities. Second, the model programs are used as training sites for students from thirteen university departments across most colleges, including nursing and medicine. Training opportunities are also offered for day care personnel and through an annual summer conference. Finally, the Center serves as a research site for advanced studies and the evaluation of effective practices.

The Washington County Schools operate their preschool handicapped program within the Center for Early Childhood Learning and Development facilities. This program operates, partially self-contained special education and hearing impairement classes and uses regular center classes for the placement of the handicapped students ready for full day integration. The program has a broad range of support services and works as one of the transition sites for handicapped students moving from the Center's birth to three programs.

Conclusion. Among the many concerns relative to the provision of special education services to young children, interagency issues remain particularily problematic. This is especially true for children who are below the mandatory age for educational services, those who have particularly complex problems, or those where the developmental outcomes and physical stability remain uncertain. Beyond formal, bureaucratic approaches to interagency services, grassroots collaboration between service providers is critical in meeting the day-to-day needs of young handicapped children, their families, and the shared responsibilities of service providers.

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Dr. Dean K. McIntosh
Associate Professor
Program for Exceptional Children
Department of Educational Psychology
College of Education
University of South Carolina
Columbia, SC 29208

Dr. Gail I. Raymond
Assistant Professor
Program for Exceptional Children
Department of Educational Psychology
College of Education
University of South Carolina
Columbia, SC 29208

TRAINING REGULAR EDUCATION PERSONNEL TO BE SPECIAL EDUCATION CONSULTANTS TO OTHER REGULAR EDUCATION PERSONNEL IN RURAL SETTINGS

INTRODUCTION

PL 94-142, The Education of All Handicapped Children Act of 1976, required ALL school districts within the United States to provide services for handicapped children of school age. While this was not an easy task for large urban school districts, it was extremely difficult for small, and/or isolated rural school districts. In rural districts, there were few teachers trained to work with children with handicapping conditions. Helge (1984) stressed this point noting there was a 193 percent in increase of services for rural learning disabled students after PL 94-142 was introduced. For other handicapping conditions the same large percentages were also recorded.

Further, Helge observed that two of the major problems in providing services to the handicapped was that of recruitment of qualified teachers and the retraining of qualified staff. Both of these problems, along with the rapid increase of identified handicapped children in rural areas, has probably led to the high attrition rate in special education that is found in rural areas. Attrition reports as high as 60 percent can be found in the literature (Helge, 1984).

The problem is exacerbated by the difficulty in recruiting teachers recently graduated from urban colleges and universities to rural areas. Young teachers, unless they are born and raised in the rural areas, tend to remain in the classroom for only one or two years, and then move to urban areas. This constant turnover becomes expensive for the school district, disrupts the overall efficiency of delivery services, and is not in the best interest of the handicapped children. Few strategies can be found in the literature which suggests successful methods of recruitment and retaining of these teachers.

It is clear that a new and creative approach is needed to insure the provision of high quality special education in rural areas. This paper describes a model that was developed and implemented in rural South Carolina to address this need.

BACKGROUND INFORMATION

In 1983, the Program for Exceptional Children, College of Education, University of South Carolina, endeavored to address the need for an improved service delivery model for handicapped students in rural South Carolina. It did not seem practical to endeavor to attract special education teachers to the rural areas, given the the failure of previous efforts. Furthermore, it was clearly unfeasible to try to prepare regular education teachers in rural areas to become special education teachers since the cost of retraining the numbers required would be prohibitive. A more effective, or economical, approach was needed, one that would have impact on large numbers of students at relatively low cost. The purpose of the project funded by this grant was to train teachers to utilize a different form of service delivery to meet the needs of rural handicapped student

After consideration of different approaches to service delivery, the researchers selected teacher consultation based on the fact that more special education students could be served at lower cost through this model. The researchers applied for and received a grant to train regular elementary teachers at the master's degree level to function as consultants to other regular classroom teachers with emphasis on the maintenance of the mild-to-moderate handicapped students in the regular classroom and in the identification of "at risk" students in order to prevent, or at least reduce, inappropriate referral and labeling. The training of teachers already living in the rural areas meant that outside personnel did not have to be recruited and lessened the likelihood that they would leave the area.

In order to develop a teacher consultation service delivery system appropriate for rural areas, the researchers first examined the feasibility of using current models of consultation.

While consultation is certainly not a new concept, as it has been used in business and industry for many years, it is relatively new to the field of special education. According to Kurpius (1978) the passage of the Community Mental Health Act of 1963 appreciably increased the use of consultation in both clinics and educational settings, It has, since that time, had a number of different definitions applied to it, usually by persons who have developed a specific model for a specific setting. Six models of consultation can be found throughout the literature and are found in one form or another in the field of education today. These include the following:

> Expert Model - used when it is believed that an expert in a particular field has comprehensive knowledge about a specific problem area.
>
> Medical Model - used most often by school psychologists in diagnostic-prescriptive procedures in which emphasis is placed upon diagnosing the problem and making remedial implications.
>
> Mental Health Model - used in providing direct services to the consultee for increasing coping skills.
>
> Collaboration Model - used when consultant and consultee are considered to be "equal partners" in identifying and remediating problem.
>
> Advocacy Model - used when change needs to brought about within the system using direct action.
>
> Behavioral Model - used when changing environmental factors and manipulating behavioral change in individuals.

Discussion regarding the above models can be found in the following sources (Babcock & Pryzwansky, 1983; Bergan, 1977; Brown, Wyne, Blackburn & Powell, 1979; Caplan, 1970; Conoley & Conoley, 1982; Gallessich, 1974; Kadushin, 1977; Pryzwansky, 1974; and Sarason, 1971).

The consultation approach selected for this project was based on the country demonstration program, which is an important part of any rural community. The demonstration agent provides a number of different services, including direct and indirect consultation, demonstration to large and small groups, and through a network of state, regional and national information services, they can provide materials, information, and when necessary, arrange for direct services from specialists in the field. They are responsible to persons such as farmers, housewives, homeowners, and youngsters in the community.

This model was adapted for use in providing consultation services to rural teachers to assist them in their work with handicapped children. The model program was implemented in a seven county rural area of South Carolina.

While the consultation models described above are viable in their own rights, none of them would be appropriate in its entirety for educational consultation in isolated rural areas. The expert model assumes that there is a person "in residence" who is an expert in the field; this would not often be the case in rural areas. The medical model, because it is used by psychologists, may not be in great favor by classroom teachers.

The mental health model, to many educators, connotes the teacher is having mental health problems in the classroom. The collaboration model, while probably most accepted, infers that there will always be a person readily available for collaborative efforts. The advocacy model is probably considered to be a very radical approach in rural areas. The behavioral model is too often related to behavior modification, which may not be readily accepted by many classroom teachers.

Because of the above reasons the county demonstration model was adapted. As previously mentioned, the model contains many aspects of all the above models, in that the county demonstration agent, to a certain degree: 1) function as in the expert model; 2) possibly uses the medical model in which he/she engages in diagnostic-remedial activities with farmers and home owners; and 3) obviously often is involved in collaborative types of activities as mentioned previously.

THE MODEL

This teacher-consultant model emphasizes the delivery of services to handicapped children through building level "school demonstration agents". The "school demonstration agent" provides systematic and long-range consultation and inservice to fellow teachers rather than relying on outside district specialists who rarely have an indepth knowledge of the school and its unique needs. They have the skills necessary to assist other regular educators in the maintenance of the mild-to-moderate handicapped in the regular classroom. The "school demonstration agent" can be on-call throughout the school day and will provide immediate consultation, demonstration, and if necessary, referral services.

Recruitment of the right personnel to serve as consultants is crucial. Persons who have proven their success as rural classroom teachers, established their credibility with fellow teachers and who have demonstrated their commitment to rural education by living in the area over a period of time should be the prime candidates. The model adopted did just this, in that persons with the above qualifications were recruited from the schools within a nine-district area. Therefore, the pool of teachers to be trained were already certified and practicing elementary teachers who had been living for at least two years in the rural areas in which they taught.

The teachers selected for this project were given special training to give them the knowledge and skills needed for this role. The teachers, to be successful "school demonstration agents" must have skills in the areas of curriculum development and evaluation, evaluation of the learning environment, formal and informal assessment and behavioral management. In addition, they must develop consultation skills which include roles as serving as a stimulator, organizer, change agent, researcher, administrator, trainer and technician.

Their training was provided through coursework. paid for by the project, which led to a master's degree in special education. All the coursework emphasized the needs of handicapped children in rural areas. All coursework was taken to the teacher in the field, rather than having them come to the university. To require them, as full-time teachers and part-time students, to travel distances as far as 70-100 miles each week would discourage all but the most dedicated. The logical option was to take the coursework to a central geographic area, in which all the participants would have minimum distances to travel. University faculty members were carefully chosen based upon their interest in rural education and knowledge in the subject matter to be taught. They became the commuters, rather than the students.

The participants completed a 15 course (45 semester hours) masters degree in which they were systematically given the skills discussed above through coursework, simulations, and in-depth summer programs which were provided all three summers of the project. The coursework extended over a full three year period, including summer sessions. The students took either one or two courses a semester, and two courses each summer. The first summer they worked with learning disabled children from the local school systems, on a one-hour per day basis, and with the children's parents after the tutoring sessions. During the second summer the same system utilized focusing on mentally retarded children and their families. The third summer was a full-time practicum experience in which they worked with groups of mildly handicapped children from 9:00 - 12:30 each day. They provided group direct instruction, individual tutoring, and worked with parents.

The initial coursework focused on the acquisition of knowledge about the various handicapping conditions and in assessment of handicapped individuals. At the same time teachers gained skills in programming, conferencing and working with parents. The later coursework focused on these teachers gaining skills to work with other teachers through advanced coursework in methods and materials and in topical issues. They also were enrolled in one courses in consultation and one of their major projects was to develop and implement a consultation program based upon a model they adapted that was most appropriate for their individual schools and the geographical area.

Twenty-five participants were initially chosen to participate in the project. During the three-year period, there were a number of persons who left the program due to medical problems, personal reasons, transfers of husbands to other areas, or lack of ability to maintain the academic rigor of the program. In Summer, 1986, 14 received masters degrees in special education and presently are working in the field.

Unfortunately, there was not an extension of the federal grant for three years, therefore the implementation of the model is being carried on by the school districts without the assistance of the University. An informal survey shows that all of the teachers trained are function to some degree as consultant teachers. Some are very active, in their roles, whereas others have less responsibility in this area, depending upon the school system and the particular school.

SUMMARY

A "school demonstration agent" model has been developed for the providing services to mild-to-moderately handicapped children in rural areas. It is based upon the work done by County Demonstration Agents who are located in every rural community in the United States. The agents provide a number of services, including consultation, demonstration, information, and arranging for services from others as part of their overall responsibilities. The model developed for classroom teachers does exactly the same, except in a classroom setting. The model does seem viable and has proven its value in rural school districts.

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GENERAL SESSION

WEDNESDAY, MARCH 18, 1987

8:30 - 10:00 AM

Norman Howe:

My remarks will cover about a ten minute period of time. I think that's important to know because the presentation that comes up next, the panel, I think is extremely important and is one of our real concerns at the federal level. I really feel extremely privileged to be here this morning. The uniqueness of this particular conference provides a forum that brings together many of the very significant and important people who will find the solutions to the problems of delivery of special education services in the rural areas. You have legislators, school superintendents, principals, boards of education members and parents, directors of special education teacher trainers, teachers, and so forth. If I had the morning, I would have been excited about talking with you about these particular topics. I would have talked with you this morning about our general education initiative, which I think is very important to your concerns. Basically, it concerns how we integrate handicapped children into regular classrooms, and ensure that they have good programs. The thing that has gained a lot of attention for us is targeting critical needs. That may be more important to us than it is to you because of our limited resources at the federal level.

The budget I work with is $67,730,000. That's a lot of money in one pocket, but when you think about the total system, $67 million just isn't much money; and we are charged with getting the most from that limited dollar. So, we're thinking carefully about targeting critical needs. If we're thinking that way, I suspect it will move down to the state level–if it isn't there already–and certainly to the local level. We're doing some long range planning; for the first time since I've been with the federal government, we are starting to look at a plan, and to me that's very important.

I could have visited with you in terms of what is going into that plan. Basically, I would say this: we are staging the development of it, and we plan to share it with you in the field later this fall, but our starting point was a list of all of the concerns that we have in special education. And it's a laundry list--four pages long. I could talk with you about infants and newborns, which is probably the heavy part of the new legislation, PL 99-457. We could continue to talk about parent involvement, and I know that a lot of the answers are there. My specialty area, if I have one, would be strengthening preservice and inservice programs–especially preservice. That's where we're concentrating, how do we do this, and how we get a better product for the classrooms.

I think another topic I could use is needs data. How good is our data? What we can plan for and with? Probably our data are soft, at least that's the language that we keep using. It isn't as strong, or as "hard" as it should be. We want a better data base. As we look at this thing called 'targeting to critical needs,' there are two sides. If we have good data, then what do we have for capacity? To target to critical needs, you need both parts of that picture.

We at the federal agency have recognized the problems in service delivery in rural areas. I would say we can only be a part of the solution. We have limited resources. I mentioned $67 million here, and I could go on and tell you our total budget is a billion two hundred and fifty million. Even that is small in terms of the percentage of resources that goes into delivery of service when you compare the federal government's part with that of the states and local districts. Ours is insignificant - 7% probably if you're talking about a dollar resource. But still, we want our part to be important and coordinated with what it is you're finding are probable solutions.

Our Assistant Secretary, Mrs. Madeliene Will, has had an early interest in rural special education since she came to office. We, in the division for which I am responsible, have set aside some money–not much–a million and a half dollars to support a preservice competition for rural special education. What we've done is invite applications from you to do three things. One, to maintain the program you've got. If you're in a preservice program and you need some bucks and can submit a good application to us, we'll give you consideration in terms of maintenance of your program. But more importantly–the type of applications that we really like--is one that says we want to adjust our program to make it better for those people that we place in rural areas.

There are two schools of thought in terms of this training for ruralness. One, that it may only be a recruitment problem; the other, that it may have significance to curriculum and infusing content that addresses some of the problems in placing teachers in rural areas. I would add at this point, because I think it is appropriate here, that seems to come back to two things--recruitment and retention. I know those two factors are important, and I suspect you're going to continue to work on those two areas and try to find better answers. I think at this time I would also like to say to the group that if what you've been doing for six years is sharing information, that at some point I would challenge the organization and the membership to move to a different level of consideration on your concerns. That's to start making recommendations that have some inroads to solutions. I would not know how to go beyond that, but I think it's a point that I would like to mention.

I've had some questions come to me on the regulations--regulations for PL 99-457, which is an amendment to our Act. There are some significant things, as you know, in there. The heavy factor, probably, regards infants and early childhood populations. I can't say much to you until those regulations are published about April 1st. When they're published in the Federal Register, please feel free to analyze, evaluate and to comment to us on what you see in terms of those regulations. If you need a contact in the federal government, the one that you should use is Dr. Tom Irwin. What's unique, but very slow in this process of regulating, is the fact that we at the program have the responsibility for developing the regulations, but not in isolation. We have to make sure that we satisfy the Department of Education General Counsel. In addition, we have to satisfy another agency called the Office of Planning, Budget, and Evaluation. And then we have a third agency called the Division of Regulations Management. You can imagine the process of trying to satisfy all of them and then bringing it all together. My secretary, who is new but plenty savvy, said "Why don't you all get together in a room and sit down and say you're not leaving until you've come to a decision instead of keeping this stuff circulating like it does?" That's what takes time.

The topic that's coming up is certification. It started to bubble at our agency maybe three or four months ago when the National Association of Teacher Education Certification started asking some questions and wondering what role we could take. Representatives from special education to NCATE had a concern, and some of the people that have done research in this area were wondering what was going to happen, and so forth.

Here's what we've done or are doing. Next week we have some consultants coming in to work with us to do these kinds of things, and we'll share this information when we have something packaged. We want to take a good look at the state of the art in general education certification. We plan, as the other part of the picture, to take a look at special education certification, to see if anything is happening and how much and to what degree. We'll poll the issues and concerns that are there, and you'll hear of those this morning. Thirdly, we want to make some recommendations for ourselves and see how we fit into this particular picture.

As some have said it, handicapped children and youth can move across state boundaries and get into programs without any problems. But that is not true with the professionals, the teachers--those who provide service. There seems to be all kinds of boundaries out there that just make it frustrating for the profession. Usually it's something like this. If you leave from this state to go to another, before you can get your certification you've got to take a course in the history of the state. Well, it may be important, but then again, it may not be if the handicapped student is there waiting. So there are a lot of issues. I don't know what the answers will be.

I will make my last point. My notion is that when you talk "national certification," you're not talking national curriculum. We would fight that, and I'm sure you would. I think it's something different, and I also think that we need to find some ways to free up that frustration to the profession as was identified in U.S.A. Today's front page article.

Thank you for this opportunity. I'll be sitting in, meeting with, listening to as many of the sessions as I possibly can for the value that they will have to us. Thank you.

Larry Marrs:

We come now to the other component of this morning's presentation: the panel on certification. To give you some context of this--some of you are probably familiar with the Harris poll that came out a short while back as it related to the Carnegie report. I wanted to share with you a couple of the points made in that poll to give you some frame of reference for this morning's session. One of the things the poll pointed out was that by an 88-to-10 per cent margin the surveyed public felt that a new graduate degree--a master's or teaching degree--should be used in preparing teachers both in regular and special education. Eighty-two percent of the people surveyed felt that the beginning pay salary for teachers should be $20,000 and go to a high of $60,000 for a full year's work. That's two ends of a continuing discussion. Should we increase the standards for certification and, at the same time, should we increase the pay? I think that's one of the things that will probably emerge from the discussion today.

The format for the presentation now is that we will hear for a few minutes from Doris Helge, who conducted a national certification study. We will then hear from the various panel members whom I will introduce once Dr. Helge has given her brief report.

Doris Helge:

First of all, I want to thank Dr. Howe. He's been a consistent "consciousness factor" in Washington D.C., and it's very much a privilege to work with him. If you don't have a copy of the white paper that was generated October before last, please get one. That was the beginning point of saying to the country that rural needs equity - that equity is required in the U.S. Department of Education statement, and in the policy act passed by Congress, and that of course, has not happened. I also encourage you to think of what we might be doing in terms of resolution statements. Finally, Norm's statements came from his heart and experience in rural North Dakota, and we thank him. I also want to thank Kay Bull and Bonnie McGregor for drawing up this original instrument on certification that went out to you and others for responses from across the country. This information was badly needed. The results indicated that you did not want certification standards to be the same for rural as for non-rural personnel. Of particular interest was the fact that you did not want less stringent certification standards. However, you, as respondents, were also very clear that you want flexibility. That is what we need to deal with now.

Now you also said that certification requirements for rural teachers should be cooperatively established. This is relevant to the composition of ACRES and the fact that it obviously takes everyone to get the job done in rural areas. I'm sure the panel will address the study results indicating that standards should be cooperatively established for rural teachers by schools of education and by representatives of rural teachers. Respondents also suggested alternate models of student teaching supervision, and stated a preference not to have a generic rural education certification. Therefore, we need to hear from you and the panel. If you're telling us that you want flexibility, and you don't want a generic certification, please address the panel on this: when do you want specific and when do you want generic personnel, regarding the certification process?

Basically, the recommendations that came from you are short and sweet. Establish collaborative partnerships in dealing with certification issues so that the focus is the modification of teacher training curriculum, so it becomes more congruent with the needs of the field and helps you with personnel recruitment and retention. Secondly, reciprocity programs should be investigated which facilitate regional certification, particularly when you think of areas of this country--like New England--where it's so quick and easy to cross boundaries. We cross those boundaries every day, why doesn't our certification cross those boundaries? What can we do about that to increase school personnel available?

You spoke about national commissions and said that teacher excellence, and teacher recruitment and retention initiatives, are going on at the same time. Sometimes we run into each other because we're requiring higher standards of people entering the field. We're requiring higher standards of students in high school for graduation. We have teacher shortages that are becoming increasingly acute. Address your questions to the panel and ask them their opinions. I know a number of you are dealing with this at your state level, and each state seems to have a commission dealing with certification requirements.

You also asked for further research, specifically about successful rural teacher training programs. We'll do that. You asked for another type of follow-up study which begins with the green form, that you have in your packet. If you haven't filled out that green form I think you'll know for sure after this panel presentation that it's vital that you do so. What we'll do is feed those results immediately back to you. Information has been requested by the Hill and will also go directly to the U.S. Department of Education.

Many of you said state paraprofessionals should be certified and are not. Most of your states, of course, do not certify paraprofessionals. Most rural areas have to have such personnel.

The next to the last recommendation that you made is especially important--that state teaching and practicum models should be cooperatively developed between the groups that you mentioned before--teacher training institutions, rural schools, and state education agencies. You also said that you wanted to see comprehensive experiences for rural teacher candidates built into that cooperative process. That's something that ought to be a lot of fun for us to work out as a group, because that's what this group is composed of anyway--everybody that has to do with rural education.

Your last recommendation is, when possible, that rural teacher candidates be required to complete their student teaching in rural schools. They should be supervised by fully certified rural teachers and receive continuous feedback from both their immediate and their university supervisors. This could be an affiliated clinical program model, or it could mean other innovations. We've seen a lot of exciting things taking place around this country. For example, a lot of rural student teachers are living with families now, giving them a real feeling for the community. Some states are even "growing their own"--e.g., South Carolina going into high schools and talking with students about why they might want to teach in a rural area. They are first encouraging them to teach, because we do have too few people interested in teaching now.

So I think we have a whole host of issues that the panel is going to be addressing. Again, we encourage this to be as interactive as possible because they want to be responsive to you.

Larry Marrs:

Let me introduce the panel. On my far left is Pete Biaggio, who's Supervisor of Resource Programs and Service agencies in the Nebraska Department of Education. Next to Pete and on my immediate left is Dr. Kay Bull, who is an associate professor in Applied Behavior Studies in Education at Oklahoma State University. Both Pete and Kay have been long time members of ACRES and have been very involved. Next to Dr. Helge is Colleen Capper, who is a special education teacher at the Red Bird School in Beverly, Kentucky. Next to Colleen is Jane Schulz, a parent and professor of special education at Western Carolina University. Today Jane will be speaking to you from the perspective of a parent, and I'm sure she will probably also have some things to say in terms of one who prepares teachers.

The process will be that we'll give each of the panelists about 5 minutes to respond to the certification study. They've had an abstract of the study for some period of time now. After all of the panelists have presented, we will open the floor for discussion and questions. We hope that you will have some. I think it's befitting that we start with the special education teacher and Colleen, why don't we start with you.

Colleen Capper:

From my perspective, I feel that before we make any recommendations for certification, we need to find out what the personnel situation is in the rural school districts in each state, and which are struggling the most to comply with laws for the handicapped. Will these certification recommendations ultimately help kids receive quality services in these districts? The measure and degree of compliance and quality of special education programs for kids in our state and nation will be as good as those services provided in our poorest districts. If these certification policies will provide equal protection under the law to these kids and these struggling districts, and positively affect that child's daily program, then we can be assured the certification decisions will be beneficial to the remaining districts in our states and nation.

A second point is that the federal government has said that they are committed to targeting critical needs. In Kentucky, an identification study in August of 1986 showed that, as a state, we are underidentifying kids who need help. I think it's significant to note where this underidentification is occurring. They issued a map that showed the counties underidentifying kids highlighted in black. With the exception of one or two counties, the entire southeastern part of the state was in black. Is it no surprise that these counties are also the most rural and geographically isolated counties of the state? Is it also no surprise that the categories that are the most underidentified are the low incidence ones--including the severely handicapped, the behavior disordered, the visually impaired and the hearing impaired?

The first question the underidentification report asked was: "Why are these counties underidentifying students?" You don't need to pay me several thousand dollars and give a commission a year's study to address the answer. I've put my job and professional career as a teacher on the line this year in questioning the identification and placement of students in our area. The answer has been told to me, "But Miss Capper, we can't provide programs for the kids we have. We can't identify all the kids who need help because we can't find or retain teachers for them.

That brings me to the issuance of emergency or temporary certificates. Let's obtain some hard data on the number of these certificates issued per state. Within states, every time an emergency certificate is requested, I'd say it's obvious that district needs help.

State departments and state universities need to take a facilitating role in assisting the districts with the problem. The report recommends developing state paraprofessional task forces to develop certification models for paraprofessionals. Certification is great, and I agree that certification standards for rural teachers and aides should be just as high as anywhere else, but before we ask my teaching assistant to be certified, do something about her $3.50 an hour wage. Where's the funding going to come from to match the increased state requirements with commensurate wage and benefit increases? If the federal government wants to be sensitive to critical needs, and if the state and universities' prime concern is equal protection and program quality for kids, then certification is the real personnel issue. Or have we, as rural special educators, jumped on yet another general education issue band wagon with urban-based problem solving? The bottom line is equal protection--quality education leading to quality of life. I hope that, as the federal and state institutions grapple with personnel issues and certification, that the people who deal daily with critical needs--teachers, parents, LEA administrators--will be invited to play an integral part of every formal and informal decision process from here on out. Thank you.

Pete Biaggio:

I think we should have, in the certification area, local control in determining exactly who receives certification and who doesn't. It should be a state issue and not a federal issue. In Nebraska we fared pretty well with Secretary Bennett's score card on number of graduates in Minnesota, North Dakota, Nebraska. Nebraska may be out in the middle of nowhere, but we're geared toward education, and I don't think that they should be able to tell us that there is going to be the same kind of standard for Nebraska as there is for Mississippi or any other state. I think Nebraska is up and above a lot of states. I think if you make a national standard you're going to have to meet the needs of all the states. So you're going to put standards in the middle because some states aren't going to be able to attain them. I think those standards, if they are developed, will be lower than the current standards that we have in Nebraska right now.

Another issue involves equal protection under the law. We were talking about what's different for rural and what's different for urban and modifying the two, and I think the study came out and suggested that there shouldn't be a change.

I would just like to comment further on why I feel there shouldn't be a change in the standards for rural educators and urban educators, or lowering or changing those standards for rural people as compared to urban. I know the study asked whether we should change the educational requirements or certification requirements for rural teachers as opposed to urban teachers, and I'm in total disagreement with that. I think that they should be the same.

Jane Schulz:

As a family, we chose to live in a rural area. I think it was a good decision for most of us, but I think that for our son–who is mentally retarded–it was probably not a good decision. There have been many areas in his education that have been lacking, and that is a concern of this certification question. As an educator, I'm not sure how this should be addressed, whether in additional certification requirements--certainly not less--or in a different sort of preservice program or in inservice programs. But I do think that there are needs not being met for our rural handicapped students, and I would like to focus on several of those from my own experience.

When my son graduated from high school we spent several very difficult years trying to get him into a work and independent living situation. We had little help from the school system. We found that what has actually resulted in a good situation came about from our efforts--from a lot of trial and a great deal of errors. It seems to me, looking at his whole education program, that the gaps that occurred were from not knowing how to get about without public transportation, a lack of social experiences and opportunities, and most important, a lack of transitional services. Since this is also a priority at the federal level, I think it's one that we need to address that is really an acute need.

Our youngsters in rural areas who are not handicapped–at least where I live--leave the area when they finish school. Our handicapped youngsters stay there. The teachers who work with them need to work with them from elementary school to prepare them for the transition from school into the community. As teachers they need to know what employment opportunities are available in those specific communities, the resource people who can help with that transition process, and how to involve parents in touching base with those resource people. I don't know how this can be addressed. I think one of the ways is identifying teachers who wish to stay in the rural area, and helping them get acquainted with the resources in that particular area. But I'm very sure that if we do not prepare our handicapped students for life after school in the rural communities in which they live, that we're wasting our time as special educators. More important, we're wasting the student's time.

Kay Bull:

Let me start by saying that my remarks are my own and don't represent my university or the management of this organization. I've spent a lot of time looking at certification issues. Let me share some things with you from my rural ivory tower. My university is located 70 miles from the nearest anything–sitting out in the flatlands. We have a lot of students coming to us from rural settings who plan to go back to rural settings. I think that gives me some perspective on saying, "What do these people need out there?" So, I find the things that other panel members have said very interesting. I find the study to be very interesting. I'd like to respond to a couple of things that people have said before I talk about the study itself.

Colleen was questioning whether the universities or the state cares for the children and the answer is 'no,' they care for the bucks. They don't care for the kids. At least what I see says that we don't care - we're more worried about our own dollars than we are about children. Responding to what Pete said about "Should the feds dictate to the states?"–if you're coming from a state that has really high standards I think that you should be very wary about the federal government dictating to you. If you're not, and if you care as Colleen does about children, maybe we should hope that the federal government will dictate to us, because it seems to me that there are a lot of things that we should be doing for children that we are not presently doing, and I don't think that we're going to unless somebody dictates to us.

Anyway, in terms of the survey, let me touch on a few points that are of interest to me from the ivory tower perspective. First of all, it seems to be the perception of some people who responded to this survey that institutions of higher education in some way control certification requirements. That may be true in some states. That's not true in the state of Oklahoma. We have a Professional

Standards Board, which even has a couple of educators on it, that make up the certification requirements. They then go to a good friend of mine at the State Department of Education who says "This is the way it's going to be." Or, if he doesn't like it, he re-writes it, and that's what you get for certification. So there isn't much university input there.

Respondents to the survey believe that standards for rural and urban teachers should generally be the same, with some leeway made for rural teachers in remote and isolated settings. I think that is a particularly good idea. I don't think that the universities, at least the ones that I've dealt with, are going to go out of their way to make that easy. Universities, like bureaucracies in general, tend to be fairly inflexible in what they're willing to do.

Very few of the respondents favored the idea of having a teaching degree be a professional degree. Less than 25% agreed with the ideas of the Holmes report: that you should have an undergraduate degree in a content area and a teaching degree on top of that. My dean would probably be very upset--now that we're a member of the Holmes group--but I don't agree with them. I think that we train people to be teachers. I don't think that you have to be a mathematician first and a teacher second. That doesn't make any sense to me working with teachers in a rural area. If I get someone who is trained in an academic content, and they have to go beyond that and get a master's degree in teaching and then go back and start at fifteen thousand dollars a year in Oklahoma, I don't think the person who now has a master's degree is going to go back to that situation unless there's some burning need back there--like a husband or a wife who's already located in that community.

The results of the questions on student teaching brought me no surprises. Most of the respondents wanted student teachers to have certified supervisors and faculty members, and the same amount of supervision as their urban counterparts. We do that in the state of Oklahoma. I drive five or six hundred miles a week visiting student teachers and entry year teachers, so I don't see any problem with that.

As Doris mentioned at the beginning of this panel, I was involved with working on the design of the instrument. I've done a couple of other studies since we developed the original instrument. Let me just share a couple of things from those studies that I think are of particular interest–maybe not to certification, but on how to keep teachers out there in rural areas. A lot of people I've talked with who were young, beginning teachers going out in elementary education or in special education or gifted education have said, "Gee, out there in the rural it's different." They don't know exactly why it's different, but it's different. These are my kids who are rural to begin with, but we put them in a different community and they say it's different. It's a culture shock for a twenty-two year old young man or woman to go out into a rural setting. It isn't like home, and they're not quite sure what they're supposed to do or what they can do. It seems to me–from a higher education perspective–if we're going to take a proactive stance and do something positive for these kids, what we ought to do is provide a course in the sociology of educational environments which says, 'educational environments are different' and 'living environments are different.' Maybe some of my colleagues here provide that course. I know that some of the materials from the National Rural Development Institute leads me to believe that some people are doing that. In my shop we don't.

Another thing we should do for teachers who are going to be in rural settings is to provide observations, student teaching, and practical assignments that are located in rural settings so they know what they are going to get involved with. Because even my kids who come from rural settings don't necessarily know anything about rural schools except for the rural school they were educated in. That isn't hard from my perspective, but from an urban teacher training perspective that would seem to be more difficult.

There are a couple of conclusions from the report that I thought we might want to look at. It said that we should survey successful rural teachers to determine what parts of their education made them successful teachers, and find out what universities have been successful in training rural teachers and why or how they have done this. Personally, I think that these questions may be premature. It seems to me we need to find out who it is in the rural who survives and who likes being there. Once we know who likes it and who's good at it, then we ought to be able to survey that group of people and say: O.K., what are their characteristics and are any of those characteristics remotely related to the way that they were trained. I'm not sure that what we do in training makes you a good rural teacher. It may be a whole other constellation of things that might or might not make you a good teacher in some other setting.

Anyway, in terms of looking at this whole topic, I've talked with a number of my colleagues and tried to find out what they thought about rural certification. The most pointed comment that I could give you is that one of them said that we ought to have rural special education teacher certification, and there should not be any grandfather clause, and that would become the Higher Education Special Ed Teacher Full Employment Act.

So let me leave you with a couple of thoughts from the ivory tower. We in the ivory tower are always quick to offer solutions to all of education's problems. For example: the Holme's report, the Carnegie report, and others. That reminds me of a slogan from a navy outfit that I worked with a number of years ago which said, "If we can't fix it, it ain't broke." Thinking about that, it is clear that we need to do something, but until it becomes clear what it is we must remember that we are going to have to live with what we do. Thank you.

Larry Marrs:

The slogan that you just mentioned, Kay, could have been mentioned at the beginning of the panel--by you Colleen--if we can't fix it, it ain't broke. Years ago, when I was in Kentucky, we had 11,000 unserved handicapped children one year. Passage of 94-142 and the mandate to provide service to all handicapped children reduced that number to zero, with no increase in teachers in the state. Magnificent cure going on over there. The underidentification is a problem, it apparently has been for years.

Jane carried on the concept of unmet needs mentioned by Colleen. She mentioned specifically the need for transition services, and pointed out that handicapped children who grow up in rural areas stay in rural areas; therefore, there's a need to bring them into the community for life-long kinds of experiences.

Kay speaks from the ivory tower, but many of the things that he describes happen out in the trenches. He points out--from the ivory tower perspective--that what we need is a research-based curriculum to prepare special educators. What he hasn't done is look on the table in the area outside the plaza suite where we have such a curriculum available for your inspection. It was developed as a result of many of your efforts over the years, including Dr. Bull's, and based on research we gathered from rural school systems throughout the country.

Those are some of my ruminations; I have some others. I would be interested in comments, questions or concerns from the audience.

(Audience question about requiring teachers to have experience before they become teacher educators:)

Kay Bull:

Some of us in teacher education do work with kids in the schools. In fact, in the state of Oklahoma it's a mandate--if you're a teacher educator, you have to be out in the schools and teach at least 4 weeks in 5 years. Most of us do a lot more than that. Some of us would rather spend our time out in the schools.

Jane Schulz:

I'd like to respond to that too. At Western Carolina University, which is about fifty miles down the road and around a curve or two, in order to be a teacher in our school of education you have to have three years' teaching experience. I think that should be a national requirement--at least that much, I agree with you on that.

(Question regarding need for 1-2 year internships for teachers before they are certified:)

Kay Bull:

In the state of Oklahoma we have a law that requires an entry year for all teachers before they're certified. They're out teaching in the schools with a University faculty member who works with them, plus a cooperating teacher and administrator in the school. If they have some problems, we can retrain them while they're out there on the job. If you don't make it on your first year you can get another year under supervision, so you get two chances. So, in the state of Oklahoma, we have what you want.

Larry Marrs:

Yesterday I was engaged in a conference call with some people from Washington State which is still working out the issue of year-long paid internships. Our governor has proposed that kind of program.

Colleen Capper:

I think it's a great idea. I have thought that from the time I did my student teaching. We all need a year, but what Kay's talking about–Kentucky has two, where you have to have a year before you get your certificate. But it's a joke. It's put in that teachers don't get their certificate until they have passed through your little thing. But it's real pro forma.

It's back to "quality," like you said. You can say all these things, but its got to be a quality experience or it just won't work. You've got to go through to get your certificate, and it still doesn't matter to kids.

Pete Biaggio:

Colleen, one point there on the paid part. I don't believe that they should get paid. Once you pay somebody, you are automatically establishing a different type of relationship. That individual is employed rather than working for a grade. Medical interns are paid, but they also receive more rigorous instruction and training.

(Point from audience:)

In California there is such a severe teacher shortage that they've placed people in schools on emergency certificates–without teacher education training. The teacher education training takes place on the job while they're under salary. So in fact it's an on-the-job internship, driven by a need for people.

Jane:

I also have a concern about adding another certification, and I'm speaking here as a educator. We can add certifications in every area at the preservice level and still not have our students prepared. I remember one of my students saying that she had gotten a job in an urban area, and she said 'you didn't prepare me for this.' And she was probably right, because she had done her student teaching in a rural North Carolina area. We can't prepare them for every contingency. That's why I think, rather than looking at another certification area, we need to wait until they decide that they're going to be in a rural area and address their needs either at a student teaching level or at that re-certification level.

Larry:

I urge those of you who are in teacher ed and particularly interested in this topic, whether you're involved in inservice or preservice, to look at some of the materials on display over there. Those materials can be used both for preservice and inservice, and have been in many places around the country. I'd like to thank the panel members for their participation, and our audience today for their challenging questions.

CONCURRENT SESSIONS

WEDNESDAY, MARCH 18, 1987

10:20 - 11:50 AM

Abstract

"Assessing and Meeting Staff Development Needs Through a Community Team Approach"

Principal Presenter: Sharon E. Kiefer, Outreach Project Director

Additional Presenters: Deana M. Buck, Training Consultant
Lisa H. Rogers, Training Consultant
Child Development Resources, Inc.
Outreach Project
P.O. Box 299
Lightfoot, VA 23090
(804) 565-0303

Topical Area: Interagency Collaboration

Goal: The participants will acquire knowledge regarding a collaborative process for identifying and meeting staff development needs of rural community-based programs serving young children with special needs and their families.

This workshop will provide the rationale and conceptual framework for developing collaborative teams within the community while providing agency staff with team-building skills for effective interagency collaboration.

It is particularly important for rural educators to recognize that resources may be limited. By developing interagency collaboration, resources are shared and exchanged to the benefit of the families being served. Interagency collaboration also reduces duplication of efforts and may eliminate unnecessary travel for services.

Building a team is an evolutionary process based on continuing needs assessment and ongoing individual and group staff development. This workshop presents a variety of needs assessment tools for use by agencies and community teams. How they can be applied to enhance services in rural communities will also be discussed.

CHILD DEVELOPMENT RESOURCES
P. O. BOX 299
LIGHTFOOT, VIRGINIA 23090
(804) 565-0303

ASSESSING AND MEETING STAFF DEVELOPMENT NEEDS THROUGH A COMMUNITY TEAM APPROACH

AGENDA

I. INTRODUCTION

II. STAFF DEVELOPMENT

  A. Rationale

  B. Conceptual Framework

  C. Historical Framework of Collaboration

  D. Building the Community Team

III. PLANNING FOR STAFF DEVELOPMENT

  A. Individual Agencies

  B. Collaborative Team

IV. GROUP EXERCISE

V. SUMMARY

VI. EVALUATION

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Sandra T. Westall
Summit Academy
375 Pond Rd.
Spruce Pine, NC 28777

Abstract: Curriculum and Instruction

Subject: Physical Education and Art

Unit: Line and Design

Grade Level: Students with reading and motor problems.

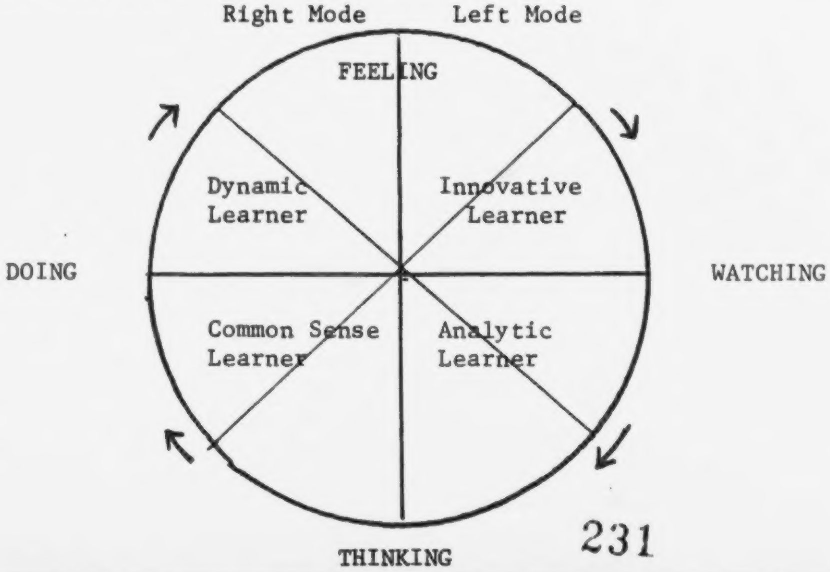
This is a workshop in which educators take part in the activities. The 4 Mat System is a whole brain teaching system taken from Bernice McCarthy's work. The audience will be taken through the unit by "moving them around the circle," a concise diagram of learning styles. Participants will be given the opportunity to share, which will encourage them to develop the confidence to delve into alternate modes of learning.

The first learning experience is the Innovative Learner. Right Mode Objective: To create line and design through physical experience. Left Mode Objective: To enhance the child's or the adult's ability to examine experience. (Everyone takes part in this activity.)

The second learning experience is the Analytic Learner. Right Mode Objective: To add to the student's or adult's understanding of the concept of line and movement. (Left Mode) Objective: To develop the concept of movement in line.

The third learning experience is the Common Sense Learner. Right Mode Objective: To combine lines and shapes and emphasize contrasts. Left Mode Objective: To give practice in creating shapes from lines.

The fourth learning experience is Dynamic Learner. Right Mode Objective: To add movement to shape. Left Mode Objective: To plan and complete an art activity.



Unit: Movement and Music

As a continuation of physical components of learning, the formations of the alphabet can be learned through body movement and music. These movements help the development of handwriting, stimulating the right and left brain, developing motor skills, and right and left hand recognition for students who have learning problems. The students feel these letters with their body and mind.

Objective: To develop the students writing, reading, spelling, and motor skills.

Author: John P. Bennett (Physical Education and Art).

The physical component of development is as important as intellectual and emotional development. It can enhance or jeopardize growth. The role of movement in one's ability to get along in society cannot be underestimated. How one moves is influenced by what one perceives. We perceive through all of our sensory mechanisms (sight, hearing, touch, smell, taste, feel). Children must be given the opportunity to explore and experiment with movement using all of their sensory mechanisms in a stimulating environment. Environments must be structured to appeal to as many different learning styles as is feasible. We need a variety of techniques in order to make the most of our students' abilities.

Our goal as teachers should be to develop the whole brain of our students. They arrive in school with a strong right brain orientation and we force them to switch almost totally to left brain processing. It is time we put the whole brain and the whole body to use. Physical expression, when it is allowed to be original with the individual, is a powerful means of engaging the whole brain of our students. The 4 Mat System is designed to facilitate whole brain development.

David B. Barnes
Cheryle Barnes

Dare to Dream: A Non-Categorical Service Delivery System

As we rapidly move toward the 21st Century, educational leaders at all levels must stand back and examine where we are going and the relevance of the educational system in the greater scheme of life. The major question is: "Are we meeting the needs of today's youth in preparing them for a rewarding and enriched life in society?". We must examine such major goal areas as: employment, worthy use of leisure time, enriched family life, and adequate problem solving skills. It is doubtful that these goals can be accomplished in the traditional academic classroom. Therefore, educators must indeed find many ways for classrooms and schools to interface with the rest of society in a meaningful way. This will become increasingly more important as we move into the next century, and has special significance in the field of Special Education. This is particularly true with fewer and fewer students dropping out of secondary schools and having expectations of employment upon completing their program. With this in mind, we must truly assess the nature and scope of current school programs. We must also assess how they fit the range of needs for the wide variety of students who remain in the secondary school and particularly in Special Education programs.

Educators must increase liaison with industry and the business community to supply added enrichment to educational programs and become involved in the integral core of educating students for the "real world". Employers are suggesting that young people they hire do not have an education relevant to the occupations that they have to offer them. With the explosion of technology, this can only become increasingly more true. Looking at the worlds of education and work, one certainly sees this in action. In preparing for certain occupations teachers are still using paper and pencil technology when employers in the real world are operating their business utilizing computers and lazers to accomplish the necessary tasks.

It is doubtful that educators and the educational system can keep up with all of these changes in technology and the only feasible change is to include employers as an integral part of the teaching scheme. This movement is not a new concept and has always been part of graduate study particularly in the fields of medicine, law, education, and other professions. However, at the present time, and in years to come, this must spread rapidly into other post-secondary and secondary school programs if education is to maintain relevance for students and employers in the 21st Century.

Not only is this concept of cooperative education essential for many students, but futurists are also predicting that jobs in the future will include more cottage industry types, small entrepreneurial business, and speciality businesses. These occupations will be centered around transfer of information and the offering of personal services. Schools of the future may by necessity have to include entrepreneurial aspects, such as teaching students to operate their own small businesses. Different educational skills will be needed by students for economic survival in the future.

As businesses and industries become more and more willing to accept handicapped employees including those with mental function handicaps, it will be increasingly important for schools to prepare students for employment in these various industries. This means, more specific job training, a liaison with a variety of local industries and certainly schools, along with parents and handicapped individuals, must play an advocacy role with the business community in each area.

The performance "myth" must be exploded. For example, educators must be aware of the excellent work record of handicapped already in industry and be able to point this out to prospective employers. In the 1981 DuPont Survey entitled "Equal to the Task", DuPont followed up on their 2,745 handicapped employees and compared them to their non-handicapped employees on three parameters. They learned that the handicapped employees had better overall performance records than did their non-handicapped employees in the areas of safety, job duties, and were only slightly lower in attendance. The low attendance record was considered normal since many of these individuals had severe medical problems and had to spend considerable time in hospitals and visiting specialists. Educators have a responsibility to make industry aware of the fine work records of the handicapped and to design programs to prepare them for entry into the world of work.

Carl Rogers, in his book "Freedom to Learn", states: "The only man who is educated is the man who has learned how to learn: the man who has learned how to adapt and change: the man who has realized that no knowledge is secure, that only the process of seeking knowledge gives basis for security.". With this in mind, educators must continue to design educational learning experiences for students which will have relevance in the world of today as well as the world of the future. Teaching today's technology will not adequately prepare students for life in tomorrow's world. We must teach them the thinking and adaptational skills necessary to feel a sense of security in a world where the rate of change is continually increasing.

The "back to basics" movement in the late 1970's and early 1980's was primarily aimed at curriculum content and emphasis in our schools. In the future however, the "back to basics" movement will be applied to teachers and schools and their ability to accept the responsibility for each child and to develop for him/her, an appropriate educational program. This program must center around the prevention of failure and increased self esteem. This may be perhaps the most significant way of counteracting feelings of frustration, futility, and hopelessness that prevade the outlook of many of today's youth. One need only look at statistics on the number of "learning disabled" young offenders in our prison system and the ever increasing number of adolescent and even childhood suicides in our society to be aware of the perceptions of many of our young people today.

Educators must continue to search for ways to make all students aware that regardless of their abilities, they are worthwhile human beings and have every right to be in our society and our schools. Not only do all students have a right to be in schools but they have a right to be there as first class citizens and to be treated with respect and dignity and rewarded for those things that they can accomplish. Education must attend to all students' need for acceptance and security in an attempt to prevent and minimize many of the social ills plaguing our society today.

In the field of Special Education, new methods and techniques must be continually tried. Often it is not the child's lack of ability, but our lack of ability to reach the child, that is one of the major contributing factors to his lack of growth. Technology can be an aid in assisting teachers to reach students however, it cannot be looked upon as a replacement for the human interaction necessary for growth. The future will see practitioners using a variety of techniques such as yoga and meditation with students who, at the present time, are thought to be incapable of benefitting from these techniques.

The future will see an ever increasing movement away from the diagnostic labelling of children in order to qualify for funding. Perhaps at one stage of evolution, Special Education needed public law 94-142 in the United States. Its primary purpose was not however, to establish a model of service delivery, but to remind us all of the human rights of handicapped children and our responsibility as a society for funding an appropriate educational programs for them within our public schools.

In the United States, the National Association of School Psychologists have issued a position statement designed at reducing the rigidity of the current system of classification and placement utilized under public law 94-142.

In this statement, they point out the following major problems:

1. Children are being inappropriately diagnosed as handicapped and placed in Special Education due to:
   (a) lack of regular education options designed to meet their needs;
   (b) lack of understanding of diverse cultural and linguistic backgrounds;
   (c) inadequate measurement technologies which focus on labels for placement rather than providing information for program development;
2. Labels are often irrelevant to instructional needs;
3. Funding mechanisms are dependent on labels in order for children to receive services;
4. Categories based on deficit labels are arbitrarily defined, particularly for mildly handicapped and low achieving students but which become accepted as "real" and which may prevent more meaningful understanding of the child's psycho-educational needs;
5. Reduced expectations for children who placed in special needs programs;
6. Assessment processes aimed at determining eligibility which often deflects limited resources from the determination of functional educational needs in the development of effective psycho-educational programs;
7. A decreased willingness on the part of regular education at times bordering on abdication of responsibility to modify curriculum and programs in order to better meet the diverse needs of all children.

In the same document, this Association states: "In view of these problems, and based upon the commitment to see that all children receive effective and appropriate education, irrespective of race, cultural background, linguistic background, socio-economic state, or educational need, we believe:

1. All children can learn. Schools have a responsibility to teach them, and school personnel and parents should work together to assure every child a free and appropriate education in a positive social environment;
2. Instructional options based on the individual psycho-educational needs of each child, must be maximized within the general education, eliminating the need to classify children as handicapped in order to receive these services;
3. Psycho-educational needs of children should be determined through a multi-dimensional, non-biased, assessment process. This must evaluate the match between the learner and his/her educational environment, assessing the compatability of curriculum and system as they interact with the child, rather than relying on the deficit based model which places blame for failure within the child. Referral to the assessment and placement process must always relate directly to the services designed to meet the psycho-educational needs;
4. In addition to maintaining current protections for handicapped children, protections and safeguards must be developed to ensure the rights of children who are at risk for school failure and require services while remaining in general education without classification as handicapped.".

When a group who has benefitted dramatically from the passing of public law 94-142 in the United States, through increased number of jobs, increased salaries, and an increase in professional status; speak out against the evils of current practices in education and makes positive suggestions for future directions educators must take note.

The essential ingredient in delivering education services, whether classified as "regular" or "special" is teacher attitude and acceptance of children.

One of the basic principles then in establishing and constructing a system for the delivery of Special Education is that self esteem of students must be a priority.

The authors, in discussing the other considerations in system development, would suggest that like self esteem, other philosophical issues be dealt with prior to the establishment of policies, remembering that there is nothing quite as practical as a workable philosophy. The reason for this is that it makes future decision making much easier, whether it be global decisions regarding school board policy or individual decisions regarding children within the system. Following philosophical issues, the individuals concerned must deal with the needs and the strengths of the area and develop a model for the most comprehensive delivery of services to both "special needs" children and their parents. There is nothing more confusing to parents, teachers, and others, than to have many of their questions answered with seemingly unrelated policy statements and to have these statements treated as though they came down off the mountain in Moses' other hand. This leads to several considerations that must be dealt with in system development. First of all, the system must be simple and easy to understand by all individuals directly involved including: special education teachers, regular classroom teachers, school administrators, parents, and school board members. The system must offer practical and concrete suggestions to all the individuals involved and must be capable of being utilized as a tool for the delivery of services as well as planning. The system, when developed, must be an integral and leading part of the community and not a separate entity unique to itself. The system must attempt to coordinate and utilize, not only educational facilities, but those facilities in the community such as home, church, and other agencies. The system should reflect modern thought in education and must, in some way, deal with "mainstreaming", parents rights, early identification of learning problems, and the "total child". The system must offer a continuum of services which provides a variety of methods and the right amount of "special help" so that each student requiring assistance receives it in the most appropriate way.

Two words we frequently use in our vocabulary are "rural" and "urban". They mean very different things to many people and have tended to be described in a variety of ways. Their meanings can be as diverse as: distance from a metropolitan centre, population, access to services, primary occupational groups and population density.

School systems have only, in fairly recent history, become concerned with access to services. Prior to this movement, children who could not fit into the traditional school system in any area, were excluded and it was parental responsibility to find alternative educational programs appropriate for their childrens' needs. This has changed and many of the services that school systems wish to access are not those directly offered by the schools themselves but those dealing with health services and social services of a specialized nature. It is these medical and specialized social services, not educational services, that tend to be centered in urban areas, making it more difficult for rural school systems to take advantage of them.

An additional complicating factor in the field of Special Education is that most of the Special Education programs that are in existence today also had their root in urban areas where Special Education programs were developed before those in rural areas. In the initial stages of the development of urban Special Education programs, many school districts insisted upon having specialists from medical fields involved in the establishment of the programs, as well as in selection committees, and as advisors and consultants to the teachers and others who worked in these programs. When the movement for "the right to an education for all children" moved into rural areas, rural school systems turned to their urban friends for a model to establish programs and policies. It soon became evident that this urban model could not be transferred directly because rural areas did not have the pediatric neurologists, child psychiatrists, educational audiologists, and a raft of other specialized professionals to rely on for the development and maintenance of their Special Education programs. It also became evident that when specialists were available, they were used more as consultants rather than delivering direct service to children. The specialist role in rural systems became one of assessment of children and developing programs to be delivered by parents, teachers, aids, and volunteers.

A further distinction between the delivery of services in an urban system and a rural system is the "ownership of the program". Urban areas tend to have a larger Central Office staff and often take a majority of the responsibility for supervision of classes and programs within individual schools. In rural areas, the principal of the school must accept ownership of and responsibility for the program and rely more upon Central Office staff as consultants to assist themselves and teachers in making their programs operate effectively as possible.

Due to the specialized nature of many classes which were established in urban areas, it often has been difficult to move students out of these classes. This often is because of fear on the part of regular classroom teachers. As a result many urban areas have not moved as rapidly to place as many children as possible in the least restrictive environment. Often teachers in rural areas have had a great deal more experience working with "special" children because there were no alternatives. In addition to this, many of them have had experience in multi-level classrooms and providing the specialized services such as art, music, and physical education, than have their urban counterparts.

Many of the foregoing statements and examples are generalizations. However, it is felt that Special Education programs, must develop their own model based on an assessment of the strengths in each community and find methods to mobilize these strengths in order to develop the best possible program. It is indeed easy to look at what the small community lacks and use this as a basis for not delivering as many services as possible for "special" children and their parents. One must remember the motto of the Christophers', "It is better to light one candle than to curse the darkness". Earlier, it was pointed out that many rural areas center upon their weakness, which is primarily, "lack of specialized services", both within the educational system and in the areas of health and social service facilities. Some important strengths that can be found in rural areas are: 1. a more stable population base; 2. a greater sense of community; 3. more person to person communication among both professionals and parents. These strengths can be utilized in developing service delivery models in rural areas.

The development of a new model of Special Education delivery is extremely difficult in areas where there are established systems, especially one that is based on a great many special classes for children with a variety of diagnostic labels. In addition to this, the passage of public law 94-142 in the United States has led to the lumping of children with like diagnostic labels into special schools and special classes often without enough consideration to their unique learning styles and strengths as individuals. The maintenance of this system in many states is rationalized by many individuals who feel that if it is not followed, money will not be available. This has proven to be false in the State of Massachusetts where it is now illegal to label a child but one may describe a child's learning and behavior and still offer adequate services.

The lack of integration between regular education and special education has also increased the labeling process to the point of making educators believe that this is the only way in which children can receive the special kind of assistance they need. Dr. Laurence Lieberman, in his book "Preventing Special Education....for Those Who Don't Need It", states that current educational research and literature is replete with reference to overkill in every facet of Special Education service delivery: referrals, testing, programming, conferencing, paper work, diagnosing, labeling, and above all, promoting Special Education as the means by which regular education problems are solved. Second, only to this contention, by many associated with education, that the vast majority of children having school based problems do not have anything inherently wrong with them.".

The authors firmly believe that both principals and teachers must first and foremost have a mission of service to all of their students. In addition, they must have the ability to conceptualize the present functioning of their students and to assist them in establishing realistic future goals. Teachers must learn to evaluate themselves in terms of reducing the gap between their goals and their actual teaching practices.

Teachers whose classroom practices are in line with their goals and philosophy usually achieve much greater job satisfaction than teachers with wide discrepancies between their goals and their practices. Job satisfaction is an important aspect in preventing teacher "burn out" and in increasing the self-esteem of teachers. It is difficult for a teacher with poor self-esteem to effectively assist students toward increased self-esteem.

As special educators, we must begin to recognize that we are not a system onto ourselves, any more than a school is a system that exists outside a community and that we are all part of a much bigger holistic design to help children to develop to their fullest potential in all ways possible.

The authors therefore suggest that all traditional labels be dropped in establishing the service delivery system for a school district. Although this may not be practical in some places because funding is based on using these labels, it is certainly a goal to aim for. Some states have already passed legislation making it illegal to use these labels in regards to children. The cascade model of service delivery certainly is a helpful tool in viewing the levels of service required by students at any particular time. These levels must, however, be used on an individualized basis with students and not become a replacement for traditional categories such as multi-handicapped, TMH, EMH, LD, etc. The authors suggest that in rural areas, they have had considerable success in working with the system that categorizes children as highest need, high need, and other needy children. These labels descriptive of the childs level of independent functioning at any given time. As simple as this seems, it is easily understood by professionals and laypersons as well and is descriptive of the level of service required for students rather than based on more traditional diagnostic labels. This system also allows for more flexibility in planning and movement of children as their level of independent functioning improves. This concept is certainly not new. As far back as 1971, James Mooney, Director of Diagnostic Services for the Northern Suburban Special Education District in Illinois, presented a paper entitled "Softening of the Categories" in which he stated "traditions, even when made of clay, tend to become hardened over time". Mooney further states that efforts to soften the categories, lead to improved models for Special Education programming. The avoidance of medical - psychological labels in educational practice help educators focus more on each child's individual needs rather than on common needs of a group of children having a similar defect or problem.

In the development of a model, certainly mainstreaming must be dealt with as a major philosophical issue. The term "mainstreaming" is not only a philosophical issue, but in many communities, has become and emotional issue. This has polarized many groups and school systems and prevented the development of the types of services that people would like to see for children having "special needs".

There are several significant reasons for school boards to move toward increasingly more mainstreaming. Firstly, it is a model of democracy which is created by establishing an educational environment where the worth and dignity of each student is acknowledged, and where individual differences are recognized and accepted. Also, it is a means for educating disabled children in an environment that most closely resembles the real world. Regular program students receive experience with students they are not likely to meet in a society where the disabled are segregated. Segregated programs and institutions have had minimal success. Labeling and segregating exceptional children increases their distinct categorization and stigmatization.

In addition to the foregoing considerations and philosophical issues, the Special Education model of services must consider and deal with the following: the school's role in prevention, which is effective liaison with pre-school. programs, medical personnel, social service personnel, and other community agencies who are all interested in the welfare of children and their families. In addition to this, they must deal with some form of pre-school evaluation and screening designed, not to label children, but to understand and assist them in their development. Although in many places, programs for pre-school handicapped are available, there are many rural areas where this is not true. It is suggested that educators, as the largest professional group in any community, become involved in establishing a variety of pre-school programs to prevent the need for additional Special Education Services when children enter the school system. This may be accomplished by school boards offering professional support to these programs, or by local teacher unions or associations giving financial and professional support.

Each school board, in developing a system of service delivery, must deal with both pre-referral and referral procedures. There have been many suggestions in dealing with pre-referral procedures such as teacher assistance teams, and in-school Special Education committees to assist teachers who have children with learning problems in the classroom and to eliminate unnecessary referrals for complete and formal assessment. Once this has been dealt with, a procedure for referrals can be established.

In education, parents, as well as students, are consumers and must be treated with respect and dignity. Parents must be involved with Special Education programs from the moment of referral on. Having lived with their own children for several years, they certainly can give valuable information regarding the child, his/her strengths and weaknesses, and his/her development over the years. They must be involved in the program planning and decision making concerning appropriate placement (legislated by public law 94-142 in the United States) but a healthy practice in other parts of the world. Parents should also be involved in programming and evaluation as well as establishing goals and objectives for their children.

Hopefully, the initial case conference following assessment should include the parents, the school principal or other pertinent administrator, the classroom teacher, the Special Education teacher, and the individual responsible for assessment. During this case conference, a program should be planned for each student containing a home program, a classroom teacher program, and if necessary, a tutorial program as well as available community programs that would assist the child in his development.

The aspects for consideration up to this point do not differ from urban to rural areas; however, when considering community programs mentioned previously, school personnel may have to take a leadership role within the community to develop necessary programs to assist children having special needs. The authors suggest the following:

1. a primary prevention program in cooperation with local hospitals and/or public health department;
2. specialized and regular summer camps;
3. adapted recreation programs;
4. comprehensive volunteer programs;
5. more adequate and indepth inservice programs for both Special Education and regular classroom teachers;
6. development of parent support groups and parent support programs;
7. giving needed consultation and expertise to pre-school programs and nursery schools;
8. a comprehensive program of public relations so that the general public and local professionals are aware of what you are attempting to accomplish.

In establishing a service delivery model for any school district, team work is of the utmost importance. No one person or group has all of the skills or energy to put meaningful programs into operation. The school board and senior administration of the school system must be fully informed and supportive of all areas of the program. School principals who are responsible for daily supervision and much implementation must feel that their concerns are being addressed and that their thoughts and feelings are considered in the overall planning. Parents of students must have adequate opportunities to have changes in the system explained to them and an opportunity to ask questions and make suggestions and comments. Staff feelings, both special educators and regular class teachers, must be solicited and dealt with as appropriately as possible. In addition to staff feelings, the evaluation and placement of staff in most appropriate positions is certainly a high priority consideration in the development of any system. It often seems like a paradox when administrators talk about individualization of instruction for children and yet expect all staff to function equally. Administrators have the responsibility to recognize individual strengths and weaknesses of staff and place them in the most appropriate positions. When requiring change of position of staff, they must be given adequate support and training so that they might make the greatest contribution to the program. Teachers often become extremely frustrated when they have good ideas and are not given support or freedom to implement them. Many valuable programs and some of the best ideas result from the interest and skills of individual staff members who are given necessary support and encouragement in trying out their new ideas. It may truly be said that "teacher burnout" is not the result of overwork but of feelings of frustration and impotence. The final team member that must be dealt with is the Special Education administrator whose role and responsibility is to plan, dialogue, and revise the basic system of service delivery for the school district.

M. Suzanne Spoden
Anne Stadler
Yuma Union High School
3100 Avenue A
Yuma, AZ 85364

Multidisciplinary Special Education Services for Migrant Youth

YUMA UNION HIGH SCHOOL DISTRICT #70 ABSTRACT

SPECIAL EDUCATION/CROSS CULTURAL/MIGRANT SERVICES

The Yuma Union High School District is composed of 5000 students, grades nine through twelve. Since 1984, there has been a 300% increase in Special Education students, nearly a 1000% increase in Special Education graduates, and since 1980, a 400% increase in migrant graduates. The district, located in a rural agricultural area which is isolated from any metropolitan area by at least 200 miles and is 14 miles from the Mexican border, has 48% Hispanic , 48% Anglo, and 4% Black, Asian, or Native American students. The Special Education population nearly parallels the district student population while one-fifth of the students are Migrant.

The presentators will use overhead and handouts in a discussion of key factors that affect today's secondary Special Education and Migrant students. Discussion items and group participation include certificated, bilingual staff; testing, assessments, and evaluations; interpreters and translators; public relations; attitude changes in the communities and schools; parental involvement; school discipline; staffings; liaison persons; community networking; medical services; shared concerns and solutions; special programs; extended day school; and shared programing.

The presentation emphasizes the mutual concerns and solutions that are possible when a creative, imaginative approach is taken to integrate Special Education and Migrant stucents into not only a mainstream educational program but into the mainstream of life. Unique problems of the Migrant population are discussed that directly relate to the problems of the Special Education population in a rural, conservative, isolated community.

Anita Hodges
Project Coordinator
PARENTS Project
300 Enola Road
Morganton, NC 28655

Kathleen Bouissey
Parent Trainer
PARENTS Project
300 Enola Road
Morganton, NC 28655

Charlotte Sessons
Parent Liaison
Route 2, Box 225A
St. Pauls, NC 28384

Deda Helms
Parent & former Parent Trainer
1328 5th St. Circle NW
Hickory, NC 28601

Parent/Professional Partnerships: An Effective Model for Parent Involvement in Rural Schools

In this presentation we will focus on the Parent Liaison Program employed by the PARENTS (Parents Assisting Rural Educators through Networking and Teaching in Schools) Project for increasing parent involvement and building parent/professional partnerships. PARENTS Project is a statewide parent training and information center for parents of special needs children. The major thrust of the PARENTS Project is the development and implementation of Parent Liaison Programs particularly in rural NC settings. Parent Liaisons are parents whose special needs chilren are enrolled in preschool and elementary school programs. These persons will participate in a fifteen week training program designed to provide the parents with the knowledge and skills needed to communicate effectively with teachers, therapists, and other professionals, as well as function in a linkage capacity between the school and community. The selection of the Parent Liaison is made jointly between school personnel and project staff in collaboration with interested parents.

The goals of the Parent Liaison Program are achieved through three major program components which are briefly described below:

o **Home/School Communication** is designed to facilitate parents' abilities to communicate effectively with special and regular education teachers, school administrators, and other school personnel.

o **Parent Participation** is designed to increase parents' participation in their child's educational program.

o **Parent Collaboration** is designed to facilitate information sharing among families of special needs children.

Twenty different strategies for increasing parent involvement have been developed within these three components. These strategies are shown in Figure 1. The Parent Liaison and the selected classroom teacher work together to select strategies most appropriate for their particular setting. Each training program is therefore "tailor made" to meet the needs of that situation.

A panel of persons involved with implementing the Parent Liaison Program in two rural North Carolina settings will share logistics of how the program is set up, as well as initial results seen in increasing parent involvement.

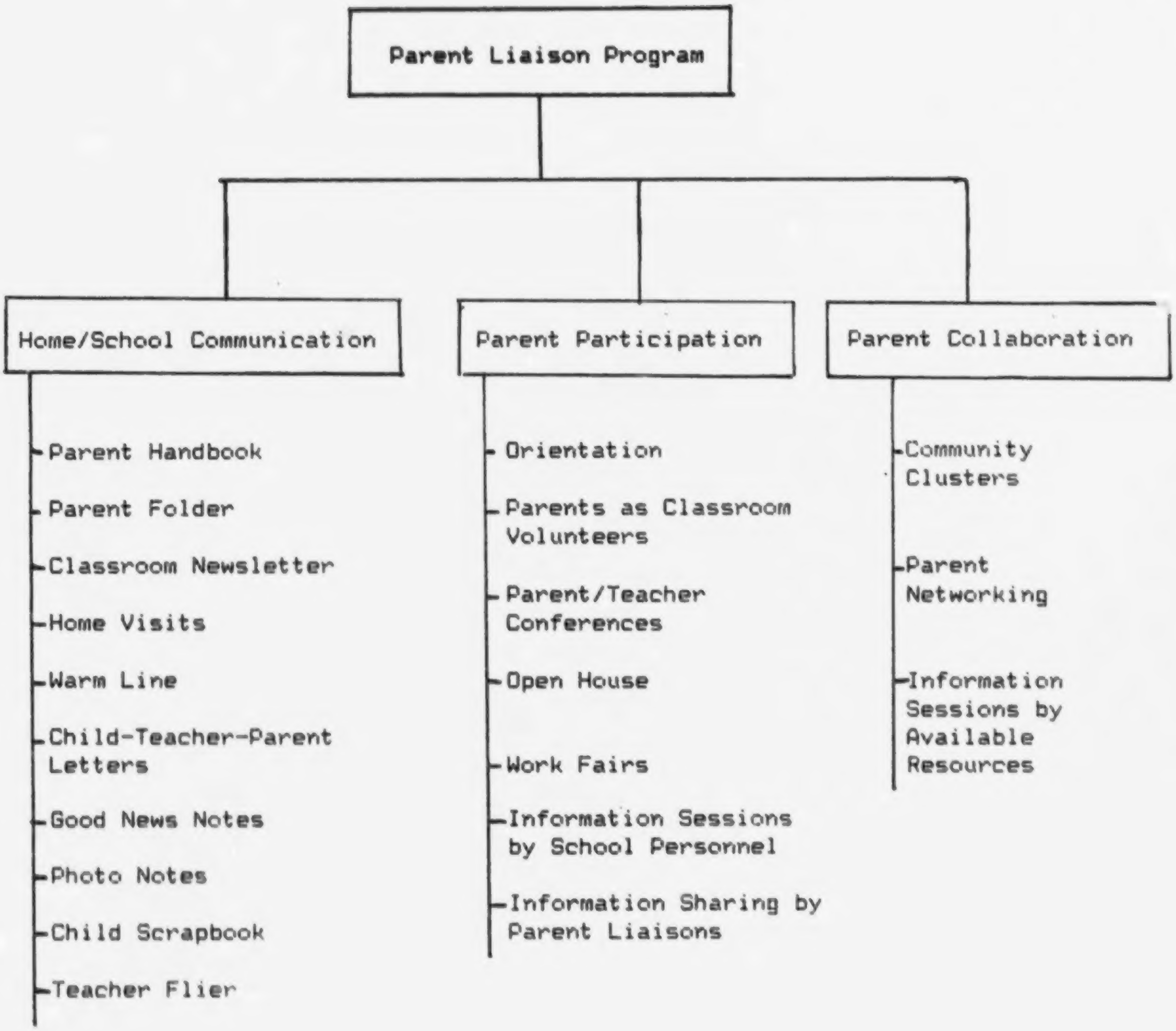

Parent Liaison Program
Home/School Communication
Parent Handbook
Parent Folder
Classroom Newsletter
Home Visits
Warm Line
Child-Teacher-Parent Letters
Good News Notes
Photo Notes
Child Scrapbook
Teacher Flier
Parent Participation
Orientation
Parents as Classroom Volunteers
Parent/Teacher Conferences
Open House
Work Fairs
Information Sessions by School Personnel
Information Sharing by Parent Liaisons
Parent Collaboration
Community Clusters
Parent Networking
Information Sessions by Available Resources

Figure 1. The major components and strategies of the Parent Liaison Program.

PARENTS Project
(Parents Assisting Rural Educators through Networking and Teaching in Schools)
300 Enola Road
Morganton, NC 28655
(704) 433-2864

Parent Liaison Program

WHAT: The major focus of the PARENTS Project is the development and implementation of a Parent Liaison Program. The Parent Liaison Program promotes enhanced communication among parents and teachers, administrators, and other school personnel. Parents are trained to function as teacher-to-parent and parent-to-teacher liaisons in order to build parent/professional partnerships.

WHO: Parent Liaisons are parents whose special needs children are enrolled in preschool and elementary school programs. These persons will participate in a training program designed to provide the parents with the knowledge and skills needed to communicate effectively with teachers, therapists, psychologists, and other professionals, as well as function in a linkage capacity between the schools and the community. The selection of Parent Liaisons will be done jointly between school personnel and project staff in collaboration with interested parents.

WHEN: Training will be offered three times per year with each training session lasting 15 weeks. The Parent Liaisons will be expected to spend approximately five hours each week in training as well as be available to function in the liaison capacity at other times during the week. Training sessions will be individually arranged between the school staff and the parents.

WHERE: Training sites are chosen from interested public schools, developmental day care centers, and Head Start programs throughout North Carolina. The Parent Liaison will be trained at the training site classroom and other available facilities identified by the classroom teacher.

ALLOWANCE: The Parent Liaison receives a stipend of $60.00 per month while participating in the training program.

HOW: For more information about the PARENTS Project, contact Ms. Anita Hodges, Project Coordinator, at (704) 433-2864.

Teaching Job-Related Social Skills to Students with Mild Handicaps:
Assessment Strategies

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Diane Baumgart and Jane Anderson
The Secondary Transition and Employment Project
University of Idaho
Moscow, ID

DRAFT: STUDY IN PROGRESS

ABSTRACT

This paper reviews considerations underlying social competence and summarizes several approaches to enhancing the social competence of students with mild handicaps in the workplace. Current assessment strategies are critiqued and the social skills identified in the literature as essential for obtaining and maintaining employment are delineated. The paper also describes a study in progress which uses an employer-validated list of social skills to collect assessment data from students, employers, teachers, and parents. The data is then reviewed and correlated across evaluators to determine the ability of students to accurately assess areas of difficulty. Results of the assessment process are discussed.

The Need for Social Competence

Social skills have been defined as the abilities necessary for effective interpersonal functioning, including the learned repertoire of verbal and nonverbal behaviors necessary to influence the environment (Rinn & Markel, 1979). The importance of personal-social skills in the adjustment of individuals with mental retardation has long been recognized (Bornstein, Bach, McFall, Friman, & Lyons, 1980). Adults with mental retardation or a learning disability may have acquired adequate basic self-help and academic skills and yet lead lonely, unhappy lives if their social skills are deficient (Valetutti, 1983: Matson & Andrasik, 1982).

There is substantial evidence that persons with handicaps have difficulty in interpersonal functioning which affects their adjustment in school, community, leisure, and vocational settings. Stacy, Doleys, and Malcolm (1979) demonstrated that the absence of appropriate social skills in mentally retarded adults was the chief reason for failure in community placements. Special educators and work coordinators in Oregon rated personal-social development above academics in importance for secondary EMR students (Halpern, 1972). Bryan, Werner, and Pearl (1982) found that LD students are more likely to engage in antisocial actions. McConaughy (1986) found them to engage in significantly fewer activities and to have less social involvement than their nonhandicapped peers, with the severity of problem behaviors increasing in adolescence. A link between learning disabilities and the social-emotional maladjustment leading to juvenile delinquency was suggested in a study by Bryan and Bryan (1978). Silverman & Zigmond (1977) contend that the inability of the student to manage the social environment of the school and to avoid getting into trouble is reason enough for training in social skills.

In addition to a lack of social competence and difficulty developing relationships, persons with handicaps continue to experience negative attitudes from others (Bryan, 1981) and their social status is lower than that of their nonhandicapped peers (Morrison, 1981).

Enhancing Social Competence in Employment Settings

Rationale

As competitive employment becomes a major objective of special education programming for students with mild, moderate and severe handicaps, researchers are increasingly interested in the relationship between social competence and the ability to obtain and maintain competitive employment. Several approaches have emerged in assisting students with handicaps to develop the social skills needed to function in the workplace or to ensure that they are placed on sites which do not require the skills they lack.

1. Changing the Environment

The behavior of individuals in social contexts is interrelated. Successful integration may require interventions that change the environment and the behavior of others in the environment as well as the individual. Research suggests that structured contacts between individuals with handicaps and those without handicaps seems to be the most consistent method of effecting a positive attitude change (Donaldson, 1980), especially if those involved are of the same age and of at least equal social, educational, or vocational status. Donaldson also found that media presentations were effective in conveying information about persons with handicaps and in reducing the discomfort that nonhandicapped individuals may have in their interactions with them.

2. Matching the Individual to the Environment

Recent studies indicate that the successful adjustment of persons with handicaps to the environment is related setting-specific performance requirements as well as person-specific capabilities (Landesman-Dwyer, 1981; Schalock, Gadwood, & Perry, 1984; Willer & Intaligliata, 1984). Rusch and Rusch (in press) suggest that one way to decrease the high unemployment rate of persons with handicaps is to assure a better match between the worker and the job in relation to two basic skill groups: work performance skills and social-interpersonal skills. One approach to facilitating the match, or congruence, between a person's behavioral capabilities and the performance requirements of a specific setting involves assessing the individual's skills, determining the requirements of the living or work environment, and computing a Goodness-of-Fit Index (GOFI) that quantifies the congruence. The weaknesses of this procedure include its inability to measure the attitudes of those who work with handicapped persons and the fact that the performance requirements of environments are not static, but change constantly (Schalock & Jensen, 1986).

3. Establishing Social Support Networks

Another approach to enhancing the social competence of students with handicaps in employment settings is to help them establish social support netwoks on the job. In a review of studies examining the role of peers in the successful adjustment of mentally retarded adults, Romer and Heller (1983) found that individuals with more peer contact were more likely to remain in the community, transfer to less restrictive settings, demonstrate independence in self-care, earn more money, and transfer out of sheltered workshops into less restrictive employment settings. Thus a support network seems critical to maintaining community jobs and residence.

4. Changing the Individual

The focus of most intervention programs to date has been on changing the behavior of individuals with handicaps rather than changing environmental variables, including the attitudes of nonhandicapped persons (Hanley-Maxwell, Rusch & Rappaport, 1986). Training in social skills has been cited as a means of enhancing prospects for gaining and retaining employment (Greenspan & Schoultz, 1981).

Results of recent studies indicate that students with mild handicaps exhibit a variety of social skill deficits which differentiate them from nonhandicapped students and which may affect their adjustment in the workplace. For example, Schumaker, Hazel, Sherman, & Sheldon (1982) found that performance differences can be demonstrated between students labeled LD and those labeled non-LD on seven of eight general social skills: giving positive feedback, giving negative feedback, accepting negative feedback, resisting peer pressure, negotiating conflict situations, conversation, and personal problem solving. Only in the area of following instructions was there no significant difference between the performance, as a group, of students labeled LD and those identified as non-LD students. In an earlier study, Matthews, Whang, and Fawcett (1980) found that LD students performed significantly worse than non-LD students on four of ten work-related social skills, including participating in a job interview, accepting criticism from an employer, giving criticism to a coworker, and explaining a problem to an employer. Given the wide range of interpersonal skills which may be required of students with handicaps in work settings, the major problems in enhancing social competence through individual programming will be:

1. Identifying those skills which are considered important or socially useful by significant others (Gresham, 1981);
2. Clearly defining the cognitive and performance components of each skill;
3. Accurately assessing skill competence; and
4. Developing intervention strategies which maximize skill generalization and maintenance.

Social Validity

Social skills programming should assess and teach skills identified as essential by significant others and training outcomes should be evaluated in terms of whether others see persons with handicaps as more valuable or competent as a result of training. Gresham (1981), in a review of social skills studies involving students with handicaps, noted a lack of evidence that the skills selected for assessment and training were actually validated as those needed for effective functioning in social interactions. Schumaker & Hazel (1984) reviewed 46 studies which identified cognitive social skill deficits or overt behavior deficits of students labeled learning disabled: a major finding was the need to socially validate identified skill deficits to determine their effect on the perceptions of parents, employers, peers and teachers of the students' social competence. The absence of social validity data may result in social skills instruction which fails to teach any critical interpersonal skills or which teaches only those skills needed in a special education setting.

Surveying employers to determine which social skills they consider essential for obtaining and maintaining employment provides a measure of social validity for an intervention program. Potential employers should be asked to specify the behaviors which are important to them (Voeltz & Evans, 1983). Researchers have identified a number of critical job-related social skills based on information provided by employers. Noncompliance with supervisors, tardiness, poor attendance, maladaptive behaviors (Wehman,1982); inappropriate behaviors (Schalock & Harper, 1978); poor social relationships and inappropriate verbal behaviors (Moss, 1979); and poor peer relationships, poor relations with supervisors, poor motivation, and inappropriate behaviors (Brickey, Browning, & Campbell, 1982) appear to be related to failure in employment for students with moderate, mild, and severe handicaps. Also related are such problems as not listening to the boss, inappropriate conversations, fighting, stealing, tardiness, nosiness, lack of motivation, and being easily angered (Greenspan & Shoultz, 1981). Vautour, Stocks, and Kolek (1983) found that employers listed tardiness, absenteeism, and failure to follow directions as concerns in training workers with handicaps. Matson and Andrasik (1982) reported that job supervisors are more intolerant of social skill inadequacies (inappropriate requests, negative statements about coworkers) than task performance inadequacies. Burton & Bero (1984) interviewed 25 local employers of educationally handicapped students to identify those skills which should be included in a comprehensive career education curriculum and learned that specific job performance skills were perceived as less important than getting along with people, coping with stress under pressure, showing enthusiasm for the job, dependability, and communicating with the public. Salzberg, Agran & Linugaris/Krafter (1985) surveyed employers from five different jobs and found that social behaviors related to worker productivity (asking for help, following directions, responding to criticism, getting information before a job, and offering to help coworkers) were rated higher than such personal social behaviors as listening without interrupting and expressing appreciation to coworkers. Baumgart and Anderson (1987) interviewed 67 employers in representative local businesses about the skills they perceived as essential for all entry-level employees. Eleven skills were rated by employers as critical: being honest, accepting and following instructions, maintaining good personal hygiene, controlling anger and stress, explaining problems and asking for help, showing interest in the job, working cooperatively, choosing appropriate work clothes, accepting criticism, accepting changes in work assignments and schedules, and saving personal business for after work.

Thus, at least in the area of employment, some social skills have been identified as critical by those persons directly involved in evaluating social competence in the workplace: employers and work supervisors.

Assessment

In addition to ensuring that the job-related social skills selected for intervention are considered important by employers, researchers must deal with the issue of whether to focus on identifying and teaching skills which are specific to a particular job site or more generic skills which are required in a variety of work settings. While a survey of community employers can yield information about the relative importance of a number of interpersonal skills (for example, interacting with customers), it will not delineate the specific competencies required in a particular work environment and their importance to the employer or supervisor (for example, the ability to interact with the parents of preschoolers at a day care center each day). An approach to the problem of whether to assess and teach general social skills versus job-specific skills may lie in combining a community-validated assessment of general social skills with an individual inventory of the specific skills required on the site where the student is placed and an assessment of his or her performance. This is especially true as noted by Gaylord-Ross, Strend-Campbell, and Storey (1986) for students with moderate and severe handicaps. It is possible, for example, that a student can perform essential social skills in a number of situations and yet have difficulty in a particular situation on his job. An ecological inventory would yield information about skills assigned a high priority by an individual employer or skills more likely to be required by a particular work setting: for example, while the ability to compliment others is not critical for a student working independently at custodial tasks, it is essential for a student employed as a sales clerk at a clothing store.

Another issue in social skills assessment involves determining just what constitutes effective skill performance and designing a multi-factored assessment process to ensure that all relevant skill components are assessed (Gresham, 1983). Social competence involves cognitive and perceptual factors as well as performance factors (Arkowitz, 1981), although the relative importance of each factor in achieving social competence has not yet been clearly established. Cognitive/perceptual factors include a knowledge of social conventions and the meaning of various response cues, the ability to attend to relevant aspects of the interaction such as the interactional context and feedback from others, the ability to process information, and the ability to predict and evaluate interpersonal consequences (Morrison & Bellack, in press). Performance components include acceptable behavioral responses such as appropriate sequences, timing, and verbal and nonverbal content (Bellack, 1979), effective use of problem-solving strategies, and acceptable frequency of appropriate behaviors. Thus, failure to exhibit appropriate social behaviors in a natural situation may be the result of skill deficits (not having the skill in one's repertoire) such as misreading situational cues or performance deficits (the inability to perform in certain situations due to anxiety, low motivation, or other factors) such as not asking for help to for fear of appearing stupid. Because the intervention strategies for a skill deficit (such as perception training, modeling and verbal rehearsal) differ from approaches useful for treating performance deficits (such as anxiety reduction and self-esteem and self-control techniques) it is critical to develop an assessment procedure which differentiates between the two.

Currently, it appears that no single assessment device currently available is comprehensive enough to serve as a basis for a social skills intervention program. This is documented by reviews of social skills curricula which identified lack of assessment as a critical deficit in all but two curricula reviewed (Schumaker, Pederson, Hazel, & Meyer, 1983). Behavioral checklists are easy to use, nonreactive, and can be designed to measure the use of cognitive skills (such as problem solving) and the quality of responses; however they do not yield socially valid information about whether skill performance results in acceptance by others. Sociometric devices and rating scales provide social validity but do not measure the specific components of skill performance vs skill deficits (Schumaker & Hazel, 1984). Self-report and simulated interactions are useful in assessing whether a social skill exists at all in a student's repertoire; however, actual measures of skill performance in natural environments are required to determine whether a performance deficit exists and under what circumstances performance is inhibited.

The assessment process, then, should:

1. Identify general social skills perceived by community employers as essential.
2. Evaluate the student's general skills performance on skills identified by community employers as essential. Self-assessment is useful because it appears that LD students may be more accurate in their ratings than their teachers (Hazel, Smalter, & Schumaker, 1983); evaluations by others (parents, teachers, and current and former employers) are useful as validity is enhanced by using multiple raters.
3. Assess job-related social skills deficits specific to the student's work setting using naturalistic observation and a skill analysis on the job site.
4. For those skills identified as deficient, determine whether the skill can be performed at all (if not, cognitive deficits exist);
5. For those skills which can be performed but are not consistently (performance deficts), delineate the conditions under which the skill is performed. The effect of situational factors should be taken into account when assessing general skills. Students who can competently perform a skill in one setting may have difficulty in

other circumstances. Naturalistic observation across settings can yield important information about whether social incompetence results from cognitive deficits or performance inhibititon due to situational factors.

6. For those skills targeted for intervention, obtain information about the quality of skill as it is currently performed and the criteria for adequate performance in situations of concern.
7. Measure training outcomes in terms of whether the student can, in new situations, perform skills on which he or she has been trained and whether the student is perceived by employers, work supervisors and others as more competent in the performance of identified skills as a result of instruction.

Two approaches are suggested by the need for a comprehensive assessment of social skills. One is to observe the student in a number of environments where selected social skills typically should be performed. This strategy can differentiate between performance and skill deficits and can target specific activities and environments in which assistance is needed. Unfortunately, this approach is very time-consuming as it depends on the natural occurence of a situation which requires the student to perform the targeted skill; however, contrived situations can be designed to offset this disadvantage. Another disadvantage of direct observation is that skill performance may be influenced by the presence of the observer.

A second assessment strategy is to collect information from a variety of people who are in a position to regularly observe a student's performance on selected skills. Data indicate that involving students in rating their own performance may provide an accurate representation of their actual behavior. A study by Hazel, Smalter, & Schumaker (1983) indicated that LD adolescents' ratings of their own skills correlated significantly with their performance both in roleplay situations and in contrived situations in the natural environment. This strategy is time-efficient, supported by research on anecdotal assessment procedures, can potentially differentiate between skill and performance deficits, and can target activities and environments which, and people with whom, a student is having difficulties. However, whether students with mild and moderate handicaps can accurately evaluate what social skills they are having problems with and the type of problem (skill or performance deficit) has not been established. In addition, the frequency of each type of deficit (skill or performance) has not been described or researched.

This study was designed to investigate the following questions:

1. Can students with mild handicaps assess themselves on their performance of eleven job-related social skills?

2. Can employers and students differentiate between skill deficits and performance deficits in identified problem areas?

Method

Phase 1- Validation of Assessment Checklists

A survey questionnaire containing twenty-one skills was prepared (see appendix). The skills included on the checklist were those social skills identified in the literature as critical to maintaining employment together with those mentioned by community employers participating in the STEP project in their evaluations of secondary students with handicaps who had participated in community-based work experience.

One hundred local employers were surveyed using the questionnaire to determine which social skills they perceived to be essential for employment in entry-level jobs. The survey included employers who were providing work observation or job training experiences for students with handicaps and employers who hire for entry level positions in careers which students with handicaps will likely engage after leaving school, including food service, custodial, and clerical occupations. Employers were asked to rate the importance of social skills to the workplace with no regard to handicapping conditions.

Employers were sent the survey checklist and asked to assign a priority to each skill according to how critical they believed it to be for entry-level employees. Employers were also asked to list any additional skills they felt were essential for maintaining entry-level employment and to indicate in general terms their reasons for terminating employees who had been let go during the past year. A cover letter explaining the purpose of the study was included with the survey questionnaire. A stamped, self-addressed envelope was also included. Six weeks after the first mailing, a followup letter with a copy of the questionnaire and a stamped envelope was sent to those employers who had not responded to the first request. Sixty-seven of the questionnaires were returned for a response rate of 67% (see Table 1).

Insert Table 1 about here

Employers were also asked to list additional interpersonal skills they felt were essential for employment (see Table 2). These were used to revise the community survey (see appendix).

Insert Table 2 about here

Table 3 reports employers' stated reasons for terminating employees during the 12 months preceding the study.

Insert Table 3 about here

Phase 2- Fieldtest of Assessment Checklists

The community-validated checklist was used to construct a preassessment device which was piloted with a group of 15 high school seniors with mild handicaps ranging in age from 17 to 20 who were enrolled in a two-semester class to teach job-finding and job-maintenance skills. Fourteen of these students concurrently engaged in paid work experience on job sites in the community for which they received high school credits.

Students were asked to conduct a self-assessment using the checklist (see appendix). Self-reports are useful for adolescents because it allows them to describe their perceptions and participate in planning (Zigmond, 1980). Results of the self-evaluation are described in Table 4. For each student, assessment data was also obtained from the parent/caregiver, current employer, and work experience coordinator using a checklist containing the same items as those used in the Student Self- Assessment (see appendix). Both forms were revised as a result of feedback from students, employers, teachers, and parents and to reflect additional items included in the community survey. For the actual study, the number of items on each checklist was reduced to the 11 skills identified as critical by at least 57% of the employers sampled.

A videotape was prepared consisting of 3 vignettes (Levels 1,2, and 3) for each of the 11 targeted skills. Level One vignettes portrayed middle school or junior high students involved in straightforward situations requiring the performance of social skills; Level Two portrayed senior high students in a more complex job-related situations, and Level Three presented even more complex situations faced by senior high students on jobs.

Phase 3- Assessment of students with mild handicaps

Forty students with mild handicaps participating in community-based work experience participated in the study. Students were asked to conduct a self-assessment using the checklist. For each student, assessment data was also obtained from the parent/caregiver, current employer, and work experience coordinator. Each student was shown the videotaped vignettes for each skill identified as problematic for him or her by at least 2 of the 4 raters. For each problem checked, the student was shown Level 2 and 3 vignettes and was asked to tell what the person in each vignette should do if he/she wanted to keep his/her job. In instances in which a student was unable to respond appropriately to Level 2 or 3 vignettes, a Level 1 vignette was shown. Two raters were employed to assess the appropriateness of each student's responses. If the student could not describe or demonstrate the skill in response to the tape, a skill deficit was assumed. If the student could adequately describe or demonstrate the skill, a performance deficit was assumed.

Results

Initial results from this study indicate that:

1. Students tend to agree more frequently than teachers or parents with employers on evaluations of student social skills strengths and deficits.
2. Students tend to exhibit performance defcts more frequently than skill defcts.

Discussion

These assessment procedures should help:

1. Determine whether a student has a skill or performance deficit;
2. Determine the conditions, activities, environments, and/or people under which the student has difficulties with social skills: and
3. Suggest the type and content of social skills intervention and provide a method of evaluating the outcomes of an intervention.

Rev 2/4/87

Table 1

Results of Employer Validation
of Twenty-one Job-related Social Skills
N=67

Rank	Skill	Employer Rating (%)			
		Critical	Helpful	Unimportant	No Rating
1	Demonstrate Honesty	99	1	0	
2	Accept Instructions	97	3	0	
3	Maintain Good Hygiene	87	13	0	
4	Maintain Self Control	87	10	0	3
5	Deal with Anger	73	27	0	
6	Explain Problem	67	30	0	3
7	Demonstrate Interest	66	34	0	
8	Dress Appropriately	64	34	0	1
9	Cooperate	61	39	0	
10	Accept Criticism	58	42	0	
11	Remain Flexible	57	43	0	
12	Refrain from Conducting Personal Bus. on Job	57	37	6	
13	Deal With Failure	52	48	0	
14	Prioritize Tasks	42	57	1	
15	Exhibit Assertiveness	33	66	1	
16	Compromise	30	63	6	1
17	Accept Praise	27	73	0	
18	Introduce Self	19	75	4	1
19	Initiate Conversation	9	73	16	1
20	Provide Constructive Criticism	7	72	20	1
21	Provide Compliments	6	78	15	1

Table 2

Additional Interpersonal Skills Listed as Essential by Surveyed Employers

Skill	No. of Employer Responses
Ability to interact with customers/clients	6
Ability to ask and answer questions	2
Good oral and written communication skills	2
Understanding policies and roles	2
Dependability	2
Maintaining confidentiality	1
Demonstrating initiative	1

Table 3

Community Validation Survey:
Employers' Stated Reasons for Terminating Employees

Reason for Termination	# of Respondents
Absenteeism/tardiness	10
Poor quality of work	7
Dishonesty/theft	5
Negative attitude	4
Low production	4
Inability to work cooperatively	3
General policy violations	2
Drugs/drinking	2
Not following directions	1
Lack of enthusiam	1
Poor hygiene	1
Inappropriate interactions with coworkers	1
Poor work habits	1
Not dependable	1
Refused to return to work after injury	1
Pregnancy	1

APPENDIX A

STEP--University of Idaho Revised 12/85

COMMUNITY VALIDATION CHECKLIST OF JOB-RELATED SOCIAL SKILLS

Please review the social skills listed below and evaluate each skill according to how critical you believe it to be for entry-level employment at your business

SOCIAL SKILL	CRITICAL	HELPFUL	UNIMPORTANT
1. Maintaining good hygiene			
2. Dressing appropriately for work			
3. Accepting instructions			
4. Following instructions			
5. Remaining flexible with changes in supervisor, task, or schedule			
6. Demonstrating interest in the job and willingness to learn new tasks			
7. Demonstrating initiative			
8. Accepting constructive criticism			
9. Accepting praise			
10. Demonstrating honesty/reliability			
11. Explaining a problem and asking for help			
12. Dealing appropriately with failure			
13. Dealing appropriately with anger			
14. Maintaining self control			
15. Engaging in cooperative tasks when asked to do so			
16. Engaging in appropriate interactions with coworkers			
17. Engaging in appropriate interactions with clients or customers			
18. Refraining from discussing or conducting personal business on the job			
19. Exhibiting assertiveness when appropriate			
20. Negotiating compromises when necessary			
21. Determining how others feel			
22. Prioritizing tasks			

Please list any additional interpersonal skills you feel are essential for maintaining entry-level employment in your business:

____

____

____

Have you had to terminate employees in the last year for reasons other than reduction in available work? _____YES _____NO

If yes, would you indicate in general terms the reason(s) for termination?

____

____

____

Respondent:____________________ Date:________________

Title:____________________ Business:________________

STEP: University of Idaho Revised 10/26/86

PARENT/TEACHER ASSESSMENT OF JOB-RELATED SOCIAL SKILLS

Student Name:____

Please review the social skills listed below and use the following scale to evaluate the student's performance on the job. Record a 1,2,3,or 4 rating for each skill.

1 = I have had no opportunity to observe the student's performance

2 = The student does not have the skill.

3 = The student has the skill but doesn't always perform it.

4 = The student performs the skill consistently and independently.

SKILL	RATING
Is honest	
Accepts and follows instructions	
Keeps hair, teeth, clothes & body clean	
Maintains self-control	
Explains problems and asks for help appropriately	
Shows interest in the job and is willing to learn new tasks	
Works cooperatively with supervisor and co-workers	
Chooses suitable clothes for work	

SKILL	RATING
Accepts criticism	
Accepts changes in work assignments and schedules	
Refrains from conducting personal business on the job	

Rater

Date

STEP: University of Idaho   Student Assessment 1   Revised 10/6/86

Name____Date______________

School____

PLEASE READ EACH SKILL LISTED BELOW. THINK ABOUT SITUATIONS THAT HAVE HAPPENED ON YOUR JOB. FOR EACH SKILL, DECIDE WHETHER OR NOT YOU HAVE A PROBLEM ON THE JOB. THEN MARK THE APPROPRIATE BOX.

	PROBLEM	NO PROBLEM
Being honest		
Accepting and following instructions		
Keeping hair, teeth, clothes & body clean		
Controlling anger and stress		
Explaining problems and asking for help		
Showing interest in the job and willingness to learn new tasks		
Working cooperatively with supervisor and co-workers		
Choosing suitable clothes for work		
Accepting criticism		
Accepting changes in work assignments and schedules		
Saving personal business for after work		

STEP: University of Idaho Student Assessment 2 Revised 10/6/86

Name____Date_______________

School____

THINK ABOUT THE SKILLS WHICH YOU MARKED AS PROBLEMS ON THE JOB.
USE THE SCALE BELOW TO DESCRIBE YOUR PERFORMANCE ON THE PROBLEM SKILLS.

1 = I don't know how I do on the job.

2 = I don't have the skill.

3 = I have the skill but I don't always use it.

SKILL	RATING
Being honest	
Accepting and following instructions	
Keeping hair, teeth, clothes & body clean	
Controlling anger and stress	
Explaining problems and asking for help	
Showing interest in the job and willingness to learn new tasks	
Working cooperatively with supervisor and co-workers	
Choosing suitable clothes for work	
Accepting criticism	
Accepting changes in work assignments and schedules	
Saving personal business for after work	

STEP: University of Idaho   Employer Assessment 1   Revised 10/26/86

Student ______________________________ Date ____________

School ____________________ Employer ____________________

FOR EACH SKILL, PLEASE INDICATE WHETHER THE ABOVE STUDENT HAS A PROBLEM ON THE JOB BY MARKING THE APPROPRIATE BOX.

	PROBLEM	NO PROBLEM
Being honest		
Accepting and following instructions		
Keeping hair, teeth, clothes & body clean		
Controlling anger and stress		
Explaining problems and asking for help		
Showing interest in the job and willingness to learn new tasks		
Working cooperatively with supervisor and co-workers		
Choosing suitable clothes for work		
Accepting criticism		
Accepting changes in work assignments and schedules		
Saving personal business for after work		

STEP: University of Idaho Employer Assessment 2 Revised 10/26/86

Student____Date____________

School_________________________Employer___________________________

THE SKILLS WHICH ARE CIRCLED HAVE BEEN IDENTIFIED AS PROBLEMATIC FOR THE ABOVE STUDENT. PLEASE USE THE SCALE BELOW TO DESCRIBE THE STUDENT'S PERFORMANCE ON THE PROBLEM SKILLS.

1 = I have had no opportunity to observe the student on this skill.

2 = The student doesn't have the skill.

3 = The student has the skill but doesn't always use it.

SKILL	RATING
Being honest	
Accepting and following instructions	
Keeping hair, teeth, clothes & body clean	
Controlling anger and stress	
Explaining problems and asking for help	
Showing interest in the job and willingness to learn new tasks	
Working cooperatively with supervisor and co-workers	
Choosing suitable clothes for work	
Accepting criticism	
Accepting changes in work assignments and schedules	
Saving personal business for after work	

STEP: University of Idaho Revised 10/26/86

SOCIAL SKILLS ASSESSMENT: DATA SUMMARY SHEET

Student Name________________________________School______________________

RATINGS

SKILL	SELF		ADULT*	TEACHER	EMPLOYER		VIDEO
	P/NP	#			P/NP	#	
Being honest							
Accepting and following instructions							
Keeping hair, teeth, clothes & body clean							
Controlling anger and stress							
Explaining problems and asking for help							
Showing interest in the job and willingness to learn new tasks							
Working cooperatively with supervisor and co-workers							
Choosing suitable clothes for work							
Accepting criticism							
Accepting changes in work assignments and schedules							
Saving personal business for after work							

*parent, guardian, or other

COMMENTS:

Craig B. Howley
Appalachia Educational Laboratory
Post Office Box 1348
Charleston, West Virginia 25325

Aimee A. Howley
University of Charleston
2300 MacCorkle Avenue, SE
Charleston, West Virginia 25304

GIFTED PROGRAMS: EQUAL ACCESS IN RURAL AREAS

Abstract

This paper considers the issue of equal access to gifted programs as it pertains to rural students, schools, districts, and states. It defines equal access and describes impediments to it. By focusing on educational policy that is amenable to change, the paper proposes three techniques to make substantive gifted education programs available to representative numbers of bright rural students.

Introduction

In the last 15 years U. S. schools have located larger numbers of talented children than at any time in history. According to state-level coordinators, there were in late 1985 over one million students identified as gifted throughout the nation. This figure was an increase of less than ten percent over the 1981 figure. Clearly, the era of phenomenal growth in the number of identified gifted students is ending.

Advocates and policymakers have now turned to improving the quality of programs. Their emphasis is on altering pull-out programs, providing more substantive instruction, and using acceleration more often.

Providing equal access to programs must also be part of the effort to improve program quality. So far, little has been done to ensure equal access, however.

Assumptions: What is Equal Access?

Concern for equal access is based on three assumptions. The first assumption is that access pertains to something essential or privileged--something important, but not necessarily relevant to everyone. Access to something trivial or harmful is more properly termed a "nuisance" or "risk," and is not an issue of privilege. Second, the concern with equality implies that access is, for some reason, unfairly restricted. Third is the assumption that efforts to remove unfair restrictions are warranted.

In order to be worthy of the efforts or resources that support them, gifted programs must be essential to bright students. When access to such programs is restricted, steps to provide equal access must show clear promise of increasing the representation of the bright students who have been unfairly excluded.

The importance of equal access. Gifted students, particularly those who are identified because of high IQ or advanced academic achievement, are able to master history, languages, literature, mathematics, and science with comparative ease. Bright students in rural schools need the kind of instruction that cultivates this ability, although they are less likely than affluent suburban students to get it. Lack of such instruction contributes to low college entrance scores and college attendance rates in rural districts.

Some educators believe that introducing rural students to the life of the mind is a mistake because it will alienate these students from the traditional values of their communities. If students are not tempted, then they cannot willingly abandon their rural roots, according to this argument. This objection is poignant, but it does not allow students to make informed decisions about their own lives. They cannot make such decisions in ignorance.

Restricted access to gifted programs. Equal access is an issue in gifted education for precisely the same reasons it is an issue in other endeavors of society: class conflict, racism, and sexism. More than race, ethnicity, or gender, however, poverty seems to be the influence that is most strongly associated with the unequal representation of various groups. It is very unlikely that children of the poor are represented in gifted programs in anything close to the proportion of the poor in the U. S. population.

The trend toward unequal representation of the poor in gifted education was established--perhaps created--by Terman. He identified very few children of farmers and workers back in the 1920s. Terman's assumptions about gifted students located them predominantly in the middle- and upper-classes.

Access to gifted programs is perhaps most unfairly limited in rural areas, because that is where our poorest citizens live (Sher, 1977). This restriction is unfair because it has not been documented that poor people are inherently less intelligent or academically talented than their more affluent fellow citizens (Dobzhansky & Montagu, 1975; Gould, 1981).

Common Impediments to Equal Access

The most pervasive impediment to equal access is the fact that many psychologists and educators are unsure about the inherent intellectual capabilities of poor children. They dispute the need for equal access not on political grounds, but on scientific grounds (i.e., empirical studies of IQ heritability among groups). The most cogent analysis of these heritability studies (Gould, 1980, 1981; Montagu, 1975), however, demonstrates the powerful influence of social and political prejudices on the empirical methods and findings of research in the social sciences.

The discussion here proceeds on the assumption that intellectual and academic ability--to the extent that it is inborn--is distributed in the same way among all subgroups of the U. S. population. That is, Blacks, Hispanics, and poor children are not born with less native talent than white, anglo-saxon, or affluent children. The discussion assumes that differences in the measured performance of various population subgroups can be ascribed to social, political, economic, and cultural influences. These environmental influences give rise to conditions that restrict certain groups from access to gifted programs. Five such impediments to equal access are considered below.

Cultural prejudice. It is not common for educators to believe that all children can learn. Surveys of teachers conducted by the Appalachia Educational Laboratory often find that teachers doubt whether all normal children can learn even in ideal instructional circumstances.

In a sense, teachers' low expectations are natural. Teachers spend a great deal of time with children whose behavior reflects a social order that is organized by the privileges of wealth and income. The behavior of students is a powerful influence on the perceptions of educators. Educators also know for certain that students of some cultural backgrounds tend to fare much less well in life than students of other cultural backgrounds.

Many educators, however, fail to examine the "naturalness" of their assumptions. The result is a widespread belief that observed differences in achievement (of both students and adults) reflect differences in native ability that are associated with cultural differences.

To expect teachers to disregard the evidence of their senses--the alienated behavior of students, the prospective adulthoods of poverty--is to expect a great deal. Nonetheless, that is the expectation of equal access. That so many agencies fall so far short in living up to the expectation suggests that cultural impediments to equal success are significant.

Family distrust of schools. The families of students from poor backgrounds often distrust schools. Rural families have strong traditional values that may conflict with the goals or methods of universal schooling. According to Litwak and Meyer (1974), families view the school system "as an outside and biased bureaucracy, an enemy of the family" (p. 124).

Parents understand that the ability of their children often is not credited by educators. This distrust is of the same sort as educators' low expectations: it is based on the evidence of common sense, but it is not necessarily warranted. Schools ought to expect achievement from all children, and parents ought to expect understanding and cooperation from the schools, even when both sets of expectations are frustrated.

The stigma of academic success. For at least 25 years, research has documented the unenviable plight of successful students. Even affluent white students suffer as a result of extreme achievement. Coleman (1961) and Tannenbaum (1962) both noted that the process of schooling worked against the valuation of intellectual pursuits. According to Coleman (1961, p. 304) the average student "as an individual, appears to be more oriented to scholarship than is the social system of the high school." Coleman blamed the schools for failing to cultivate intellectual values.

For bright poor students, however, the stigma of academic success is worse than for affluent bright students and for the average students cited by Coleman. For such students, academic success can be a token of capitulation to a system that is perceived as destructive.

Inappropriate identification practices. To perceive the inappropriateness of identification practices, educators must first accept (1) that it is fair to provide an excellent education to all groups in society and (2) that the most talented members of any group deserve the privilege of special services.

Procedures used to identify bright students do not typically result in the identification of many poor, Black, or Hispanic children. The mean test scores of these groups are lower than the total population mean. Yet when students are selected for gifted programs, their scores are not compared to the mean of similar students, but to the total population mean. In order to be identified as gifted, a Black student, for example, must demonstrate a score three or four standard deviations higher than that of the average Black student. White students need be only so rare as 1 in 33; Black students must be much more unusual among the population to which they should be compared (i.e., other Blacks). The plight of poor white students in rural areas is probably similar to the plight of Blacks.

Some districts attempt to identify poor students by using "subjective measures" (cf. Council of State Directors of Gifted Programs, 1986). These districts believe that, if they eschew standardized testing altogether, then they will be free to include more poor students. This observation is correct, but it means that districts must rely on unreliable measures that have little to do with academic talent.

There is no reason to believe that subjective measures of leadership ability, creativity, or student accomplishments will identify the most academically able poor, Black, or Hispanic students. Depending on the good will of the subjective evaluators, districts are free to include more poor students in programs; however, they are also free to exclude all poor students when they use subjective measures. This degree of uncertainty is inherent in the notion of subjective judgment.

Given what is known about cultural prejudice, it is probably very unwise to put a great deal of faith in the fairness of subjective measures. Objective measures have the advantage of allowing us to identify and even quantify our prejudices. We know, for example, what the differences in black means and white means on IQ tests are. We are very unlikely, however, to understand how or to what degree our unexamined assumptions influence subjective judgments.

Poor funding for rural programs. Without a program, there is no incentive to identify gifted children. This fact is illustrated by Marland's (1972) finding that most principals did not believe that any of their students were gifted: gifted programs were not very common at the time. Today some educators will doubt whether many gifted students can be found in rural schools.

The experience of one rural state is informative. West Virginia has one of the most strongly supported gifted programs in the nation. Every LEA has gifted programs, and the services of a teacher of the gifted are available in every school. In West Virginia, some gifted children have been identified in almost all schools. Identification is made on the basis of scores on the Binet and Wechsler scales, but an equal access provision permits identification on either the Performance or Verbal scale of the Wechsler if a child is either poor or handicapped. Because Individualized Education Programs (IEPs) are required by state regulations, parents must be involved in developing programs. Parents have influenced local programs through direct involvement; and they have influenced state policy through parent organizations, letter-writing campaigns, and due process actions.

Ten years ago, no one expected that so many children would be identified in such a region, using such means (i.e., the Binet and the Wechsler). Nonetheless, even in West Virginia, the most rural counties of this mostly rural state are those with the smallest proportion of gifted students. These counties are among the poorest funded in a state where, incidentally, funding is more equitable than in many places throughout the nation.

Removing Impediments

Education is embedded in the culture of which it is a part, and substantial improvements materialize slowly (Cuban, 1982). The reforms in educational policy now underway are not likely to affect the cultural prejudices that unfairly restrict access to gifted programs. Our culture's suspicion of academic success and intellectual values is not amenable to direct change. Overcoming family distrust is also not a very direct method of improving access to gifted programs.

The sorts of practices that are likely to have an effect on promoting equal access are those over which educators have direct control: changes in identification practices and funding for rural gifted programs. Practitioners must understand, however, that the proposed changes in identification and funding present a strong challenge to prevailing cultural prejudices, schools' and society's view of intellect, and many standard schooling practices (Howley, Howley, & Pendarvis, 1986; Pendarvis, Howley, & Howley, 1987; cf. Tompkins, 1977).

State Policies on Equal Access to Gifted Programs

In late 1985 the fifty states and the District of Columbia reported to the Council of State Directors of Programs for the Gifted on the procedures they used to admit poor students and minority students to gifted programs. Twenty-eight states reported that they had no provisions for equal access. Ten reported only that they left such decisions to the Local Educational Agency. Eight reported that they relied on generic regulatory provisions: PL 94-142 regulations, Chapter I regulations, court-ordered desegregation plans, general policy statements, and legislation. Only five states cited the use of specific provisions: four states applied "more subjective" assessment techniques to poor and minority students, and one state (West Virginia) used a definition that specifies an alternative for such students.

These five states (Alaska, Arkansas, Iowa, South Dakota, and West Virginia) are all rural states in which strong support for gifted programs exists. All require that IEPs be developed for gifted students; four (all except Iowa) mandate that LEAs conduct programs; and the same four states supply the funding necessary to conduct local programs. Only 15% of the other 46 states require IEPs; only 26% mandate local programs and supply funding.

These data, however, are suggestive rather than conclusive; they are based on reports of state coordinators rather than on controlled observations. One main conclusion, however, seems warranted: most states have done very little to ensure equal access.

Strategies to Promote Equal Access to Gifted Programs

What alternatives exist to promote equal access? The preceding discussion suggested that only two of the noted impediments to equal access could be addressed by educators: funding for gifted programs and identification practices. States that have made the most serious efforts to improve access seem to be those that regard issues of funding and identification as instrumental. Both issues are considered next.

Adequate funding for rural gifted programs.

In many states (e.g., California and New York) the primary source of funding for gifted programs is local revenue. Such a funding practice results in vigorous programs in affluent districts and "paper programs" in poor districts (Mitchell, 1981). The cultural prejudice that bright students live primarily in affluent districts is made to seem natural as a result of this funding practice.

When funding for gifted programs is distributed by the state to all local districts, inequities are lessened, though they do not necessarily disappear.

For example, in West Virginia funding is distributed to districts according to the number of exceptional children, including the gifted, in the district. In its funding formula, West Virginia gives LEAs three times the per pupil allocation for each exceptional child. The funds, however, are not required to be spent on particular programs, but become part of the LEA's general fund. They are an incentive that encourages LEAs to identify a maximum number of exceptional students.

The West Virginia approach has resulted in the identification of about 2.3% of the state's children as gifted. Very few LEAs have identified less than 1% of their student population as gifted; nonetheless, those LEAs constitute the state's most rural counties. Moreover, the most isolated rural schools in those LEAs are the ones most likely to have no students identified as gifted. The brightest students in those schools get no special assistance.

Fair identification practices. To address the problem of providing equal access in isolated rural schools (or other schools in which few or no students have been previously identified as gifted), changes in identification practices are warranted.

One approach is to alter the kind of tests used to identify students in these schools. This approach is adopted by the four states in which state coordinators reported the use of "subjective" measures. The relevance, reliability, and fairness of such measures was criticized above.

Another approach is to alter eligibility criteria for underrepresented students. This was the approach adopted by West Virginia in 1983; similar but more thorough proposals are made below. The proposals are intended to be equitable additions to current identification practice; they should be construed as tentative, experimental, and adaptable. Validation will require that studies of actual implementations be made.

Identifying the Brightest Students in Isolated Rural Schools

The most compelling argument against using norm-referenced tests to identify gifted students is that such tests discriminate against poor, minority students. There is, however, an alternative to abandoning such tests--which have the strengths of academic relevance and good reliability. The alternative is local standardization. The ensuing discussion offers three approaches to local standardization; each approach is practicable and each can be adapted to a variety of situations. The first two approaches are based on locally-generated ranks (rather than norms); the third is a complete norming procedure. Each has advantages and drawbacks that should be considered when choices among the three approaches are made (see Appendix F for a summary of advantages and drawbacks).

Commonalities. Each of the three approaches is based on these principles:

- o identification for either academic potential or demonstrated academic achievement,
- o selection of the most able 3% of a school's students, and
- o defensible selection strategies.

Application of these principles requires mastery of at least elementary statistics and of test administration. It is not likely that isolated rural schools will be able to implement these procedures without technical assistance. To implement the first two approaches, schools should have the services of a school psychologist or teacher of the gifted who has been trained in statistical methods. Implementing the third approach is more difficult; more intensive technical assistance will be required, and the development process will be more extensive. The scope of the project is such that a regional development effort might yield the best results.

Finally, readers should again note that these measures are additions to identification procedures already in place, not measures that supplant existing identification procedures. They are proposed as safeguards for equal access.

First approach. This approach, like the next, relies on existing standardized group test scores to generate a pool of referrals. In the first approach, the pool of referrals for gifted services will be those students in the school whose scores fall in the top 50% of all scores on a group achievement test. If local norms (for the school, not for the district) are available, it will be easy to select students for referral. If local norms are not available, then selection should proceed in the following manner:

(1) Determine the mean national percentile rank for the school.
(2) Refer all students scoring at or above that level.

Next, administer a group IQ test to the pool of referrals. When testing is complete, rank the standard scores obtained from this administration, and refer the top quartile (25%) for individual testing with the Stanford Binet Intelligence Scale and the Woodcock-Johnson Tests of Achievement. This will represent 12.5% of the student population of the school.

In a small school of 200 students, 25 students will receive evaluation-level testing under this plan; administration of both tests will take between 2 and 4 hours for each student. The ablest students usually require a longer administration.

Finally, rank the students (by standard scores or z-scores) to whom individual tests have been administered (one list for both tests.) Rank students by the highest standard score or z-score among the five scores obtained from both tests (see Appendix A). Make sure that standard scores are expressed in terms of standard deviations of the same size--the Binet has a standard deviation of 16, whereas the Woodcock-Johnson has a standard deviation of 15. One set of scores will need to be altered (see the note about standard deviations in Appendix A). The formula for expressing Binet standard scores in standard deviation units of 15 is as follows:

$$[(SB - 100)/16 \times 15] + 100 = \text{new standard score}$$

Working from the highest scoring student down, select as many as necessary to bring the number of children identified as gifted to 3%. In a school in which no students have been identified as gifted, this will be the top quartile of students. (Tied ranks that fall in the selection range should count as a single student. See appendix A for an example of this final selection step in a hypothetical school of 200 students. The example includes tied ranks. See Appendix B for an outline of these procedures.)

Second Approach. In the second approach, the pool of referrals for gifted services will be those students in the school whose scores fall in the top 25% of all scores on a group IQ test (e.g., the Otis-Lennon School Ability Test, the Lorge-Thorndike Intelligence Test, the Cognitive Abilities Test). Referral should proceed in the following manner:

(1) Determine the percentile rank score or standard score that locates the top quartile of students in the school.
(2) Refer all students scoring at or above that level.

Next, test each student in the pool of referrals with an individually-administered screening-level IQ test. The Slosson IQ Test is a good choice because it has been shown to be an effective and efficient screening test to use with gifted students. Short forms of the Wechsler scales and the Binet are also available for screening students in this approach (see Howley et al., 1986, pp. 45-48).

When test administration is complete, rank the standard scores obtained from this administration, and refer the top quartile (25%) for individual testing with the Stanford Binet Intelligence Scale and the Woodcock-Johnson Tests of Achievement. This will represent 6.25% of the student population of the school.

In a small school of 200 students, 13 students will receive evaluation-level testing under this plan; the time requirements and cautions cited above (for the first approach) apply to the second approach as well.

Finally, rank the students (by standard scores or z-scores) to whom individual tests have been administered (one list for both tests). Rank students by the highest standard score or z-score among the five scores obtained from both tests (see Appendix A). Make sure that standard scores are expressed in terms of standard deviations of the same size--the Binet has a standard deviation of 16, whereas the Woodcock-Johnson has a standard deviation of 15. One set of scores will need to be altered (see the note about standard deviations in Appendix A).

Working from the highest scoring student down, select as many as necessary to bring the number of children identified as gifted to 3%. In a school in which no students have been identified as gifted, this will be about half of the students who have received individual tests. (Tied ranks that fall in the selection range count as a single student. Again, see Appendix A for an example. See Appendix C for an outline of these procedures.)

Third Approach. The third approach is a more ambitious project. In this approach, an entire rural district is involved in developing local norms.

The first step is to include enough schools to allow selection of a representative sample of rural students. The development team will need first to develop a criterion for schools from which to draw the sample. Ideally, these would be rural schools in which few gifted students have been identified. Perhaps a criterion of fewer than 1% of identified gifted students would be reasonable.

The second step is to select a representative random sample of students for each year of age from kindergarten through grade 12. Thirty students for each year will allow development of usable norming data in a local district. The total norming sample, therefore, will be about 400 students. Educators might consider limiting an initial local norming project to students in grades K-6 if funding is a problem.

When it is certain that a representative random sample has been drawn, the entire sample should be administered the Stanford-Binet Intelligence Scale and the Woodcock Johnson Tests of Achievement. Following test administration, raw scores should be used to develop local norms.

Many technical decisions will need to be made during the course of the project. Technical assistance must be available to ensure that the team carries out its work on the basis of informed decisions. The development team should document the reliability of the data for each cohort; a microcomputer program that calculates descriptive statistics, percentile ranks, z-scores, KR-21 reliability, and standard error of measurement is included in Appendix D as an example of tools that are available for this work.

Finally, once local norms have been developed and validated, they can be used to identify students whose performance indicates a degree of ability or achievement that is exceptional in comparison to the average performance of the norming sample. The following definition illustrates this application:

> Gifted students are those who score at or above two standard deviations above the mean on the Stanford-Binet Intelligence Scale or any subtest of the Woodcock-Johnson Tests of Achievement in consideration of one standard error of measurement (local norms for XYZ district, September 1988 validation.)

Local norms need to be updated regularly, perhaps once every five to seven years. Development work for the initial effort might require as much as 1500 person-hours (4 staff members for 10 weeks). Updates might require 1000 person-hours. The results of such an effort, however, could be applied to local identification of educable mentally impaired, learning disabled, and other remedial populations as well. The project might be most effectively and efficiently carried out by an intermediate service unit or regional educational agency (see Appendix E for an outline of these procedures).

Advantages and drawbacks. The first and second approaches can probably be implemented with the assistance of a school psychologist or teacher of the gifted trained in statistical methods. As a source of referrals, both approaches use group tests commonly administered in schools. They differ in the way in which they require that individual testing be carried out. The first approach requires more evaluation-level testing than the second (12.5% of the school population vs. 6.25%). The second approach splits individual testing between an intermediary screening level (25% of the school population) and a final evaluation level (6.25% of the school population). Based on what is known of gifted students, the two approaches should have similar effectiveness and efficiency ratios (Pegnato & Birch, 1959).

The first two methods share one serious drawback. They can be implemented only once during the school year, since they require that a sizable pool of referrals be studied. If referrals are made at other times during the school year, the ordinary procedures (using national norms) will apply. That is, these approaches do not account for rolling referrals.

The third approach overcomes this drawback, because once local norms have been successfully developed, evaluations can be carried out whenever a referral for a bright rural child is received. Evaluators simply apply the developed norms to the test performance of a referred child. It is, however, more difficult and perhaps more costly to develop local norms (see Appendix F for a summary of the advantages and drawbacks of the three approaches proposed in this paper).

The Nature of Substantive Gifted Programs

It is not sufficient merely to identify the brightest rural students as gifted; their identification must result in substantive improvements to their education. The nature of substantive gifted programs is explained briefly, below, so that this obligation is clear.

Recent studies (Council, 1986; Cox et al., 1985; C. Howley, 1986) indicate that most gifted programs need substantial improvement to increase the effect they have on student achievement. The suggested improvements--more extensive use of acceleration, more substantive instruction in foreign languages, literature, mathematics, history, and the natural sciences--apply equally to programs in rural, urban, and suburban areas. Programs must address students' mastery of advanced academic skills. Pull-out enrichment programs seem much less likely than other arrangements to effect these improvements (Cox et al., 1985). Policy initiatives for program improvement are specified in detail in a paper by C. Howley (1986). The use of acceleration in rural schools is the topic of an instructional module published by the National Rural Development Institute (Pendarvis, Howley, & Howley, 1987).

Summary

State provisions for equal access to gifted programs are inadequate to promote the proportional representation of bright students in rural schools. However, five rural states seem to have adopted measures that represent reasonable initial efforts. These efforts involve changes in (1) funding for gifted programs and (2) the way gifted students are identified.

This paper discussed funding arrangements that can improve equal access in some rural areas. It also presented three approaches to improve the access of bright students, especially those in small, isolated rural schools. These approaches involve changes in selection procedures, but they retain the use of identification instruments that are academically relevant.

The paper concluded with a brief statement of the need for substantive academic instruction for students identified as gifted, together with reference to sources that provide guidelines for the structure and implementation of such programs.

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Appendix A

EXAMPLE OF FINAL SELECTION RANKING IN APPROACHES 1 and 2
(hypothetical school of 200 students with no identified gifted students)

------------------standard scores------------------

(standard deviation of Binet altered to = 15)
[see formula in text]

		Stanford Binet	Woodcock-Johnson Tests of Achievement			
ID#	rank		RDG	MATH	WL	KNOW
(1)	1	137	122	118	97	129
(2)	2	124	107	131	125	110
(3)	3.5	128	115	120	103	121
(4)	3.5	109	128	108	122	118
(5)	5	120	116	111	105	118
(6)	6.5	105	109	119	105	105
(7)	6.5	119	118	119	117	116
(8)	8	115	116	108	110	109
(9)	9	102	108	112	107	98
(10)	11	97	110	101	93	102
(11)	11	107	108	110	100	105
(12)	11	110	101	89	84	110
(13)	13.5	107	109	108	100	102
(14)	13.5	109	107	105	106	108
(15)	16.5	108	108	84	92	105
(16)	16.5	108	97	102	107	107
(17)	16.5	108	107	100	98	96
(18)	16.5	98	107	108	95	104
(19)	19	105	105	104	103	106
(20)	21	100	104	104	102	97
(21)	21	103	104	87	91	103
(22)	21	89	84	104	97	100
(23)	24	103	96	102	87	100
(24)	24	103	102	101	95	98
(25)	24	103	92	91	99	96

Three percent of 200 is 6. Therefore, if no students have been identified as gifted, provide services to the 6 top-ranked students. In this case, because there is a tie in ranks, select the top 7 students (i.e., through rank 6.5). If 2 students were previously identified as gifted, provide services to the top 4 students. This example illustrates the way in which tied ranks may be handled.

This distribution is illustrative of a sample whose scores on the Stanford-Binet would yield a mean IQ of about 90 (assuming normality and variability reduced by 25%).

Appendix B

SUMMARY OF PROCEDURES FOR APPROACH #1

1. Refer top 50% of distribution on a group achievement test.
   - a. Use local (school) norms if available, or, if not
   - b. determine local mean of national norms, select all students scoring at or above that level.

2. Administer group IQ test to the pool of referrals.

3. Rank the standard scores obtained from this administration.

4. Evaluate the top quartile (25%) for individual testing with the Stanford Binet Intelligence Scale and the Woodcock-Johnson Tests of Achievement.

5. Rank the students to whom individual tests have been administered (one list for both tests.)
   - a. Use z-scores or standard scores.
   - b. If using standard scores, equalize standard deviation.

6. Select as many students as necessary to bring the number of children identified as gifted to 3%.
   - a. Tied ranks count as a single student.

Appendix C

SUMMARY OF PROCEDURES FOR APPROACH #2

1. Refer top 25% of distribution on a group IQ test.
   a. Determine local fourth quartile of national norms, select all students scoring at or above that level.

2. Administer individual screening IQ test to referred students.

3. Rank the standard scores obtained from this administration.

4. Evaluate the top quartile (25%) for individual testing with the Stanford Binet Intelligence Scale and the Woodcock-Johnson Tests of Achievement.

5. Rank the students to whom individual tests have been administered (one list for both tests.)
   a. Use z-scores or standard scores.
   b. If using standard scores, equalize standard deviation.

6. Select as many students as necessary to bring the number of children identified as gifted to 3%.
   a. Tied ranks count as a single student.

Appendix D: microcomputer program

Appendix D consists of a print out and sample run of a program that might be adapted to generate the local norms of approach #3. This program is included here primarily to demonstrate the feasibility of generating local norms with limited resources. More powerful programs, however, are available at modest cost to implement the proposals of this paper. This program was adapted from routines developed by Kanter (1985).

Previous applications. The principal presenter has used the program to conduct institutional research and to provide development data about his classroom tests. It has been used with an Apple //e micrcomputer and Imagewriter printer.

Features. From raw scores this program generates the following information and sends output to a printer:

- sample size,
- frequency distribution,
- measures of central tendency (mean, median, modes),
- variance and standard deviation,
- z-scores,
- percentile ranks,
- KR-21 reliability, and
- standard error of measurement (estimated from KR-21).

Limitations. The program is designed to receive up to 450 raw scores. The program cannot accept multiple scores for individual subjects. For use with a large number of scores, the program needs to be modified to include a loop that allows users to correct scores that are entered incorrectly. The loop that calculates sample size should also be improved. These changes can probably be made with locally-available talent in most districts.

```
 PR#0
]LIST-450

10  REM **MEAN,MEDIAN,MODE**
20  HOME
30  DIM A(450): DIM B(450)
40  PRINT "DO YOU WANT THE MODE(S) DISP. (Y/N)?"
50  INPUT A$
60  PRINT "DO YOU WANT RELIAB. & SEM (Y/N)?"
70  INPUT B$
80  PRINT "DO YOU WANT %-ILE RANKS (Y/N)?"
90  INPUT C$
100  PRINT "DO YOU WANT FREQ. CHART (Y/N)?
110  INPUT D$
120  LET T = 0
130  PRINT "ENTER # OF TEST ITEMS (<101)": INPUT K
140  PRINT : PRINT : PRINT :
150  PRINT "ENTER RAW SCORES, ANY ORDER"
160  PR# 0
170  PRINT
180  FOR I = 1 TO 1000: INPUT A(I): LET T = T + A(I)
190  FOR G = 1 TO N: PRINT "LAST DATA PIECE? (Y/N)": INPUT G$: IF G$ = "Y
     " THEN  GOTO 230
200  IF G$ = "N" THEN  PRINT "INPUT NEXT DATUM"
210  NEXT G
220  NEXT I
230  HOME
240  LET N = I
250  PR# 1: PRINT : PRINT "NUMBER OF ITEMS ON TEST = ";K: PRINT
260  PRINT "SAMPLE SIZE (N) = ";N: PRINT
270  LET M = T / N
280  REM ***SORT AND ORDER DATA***
290  FOR I = 1 TO N
300  FOR J = (I + 1) TO N
310  IF A(I) > A(J) THEN  GOTO 350
320  LET X = A(I)
330  LET A(I) = A(J)
340  LET A(J) = X
350  NEXT J: NEXT I
360  FOR I = 1 TO N: NEXT I
370  FOR J = 1 TO K: NEXT J
380  LET B(J) = 0
390  FOR I = 1 TO N: FOR J = 1 TO K
400  IF A(I) = J THEN  LET B(J) = B(J) + 1
410  NEXT J: NEXT I
420  IF D$ = "N" THEN  GOTO 560
430  REM **CLEAR, DATA DISP, HI TO LO***
440  HOME
450  PRINT "SCORE","FREQUENCY"
```

```
]LIST460-910

460  FOR J = K TO 1 STEP  - 1
470  IF B(J) <  > 0 THEN  PRINT J,B(J)
480  NEXT J
490  PRINT " "
495  PR# 0: PRINT "FORMAT PAGE BREAK": PRINT : PRINT "THEN PRESS 'RETURN'
     ": INPUT L$: HOME : PR# 1
500  REM ***TALLY, DISP. 0'S***
510  LET C = 0: FOR I = 1 TO N
520  IF A(I) = 0 THEN  LET C = C + 1
530  NEXT I
540  IF C <  > 0 THEN  PRINT "0",C
550  FOR I = 1 TO N: NEXT I
560  REM **CALC MED & DISP. MEA & MED***
570  LET X =  ABS (A(I) - M)
580  IF N / 2 =  INT (N / 2) THEN  GOTO 610
590  LET MD = A((N / 2) + .5)
600  GOTO 620
610  LET MD = (A(N / 2) + A((N / 2) + 1)) / 2
620  LET ME =  INT (100 * M + 0.5) / 100
630  PRINT "MEAN= ";ME,"MED.= ";MD
640  IF A$ = "N" THEN  GOTO 760
650  REM **CALC & DISP MODE**
660  LET MO = 0
670  FOR J = 1 TO K
680  IF B(J) > MO THEN  LET MO = B(J)
690  NEXT J
700  IF MO < C THEN  GOTO 740
710  FOR J = 1 TO K
720  IF MO = B(J) THEN  PRINT "THE MODE = ";J
730  NEXT J
740  IF MO < C THEN  PRINT "THE MODE = 0"
750  PRINT " "
760  REM ***CALCULATE STANDARD DEVIATION/MEAN/VARIANCE***
770  LET D = 0
780  FOR I = 1 TO N
790  LET X =  ABS (A(I) - M)
800  LET D = D + X ^ 2
810  NEXT I
820  LET V = D / N
830 VR = ( INT (V * 100 + 0.5)) / 100
840  LET S =  SQR (V)
850  LET SR =  INT (S * 100 + 0.5) / 100
860  PRINT "STANDARD DEVIATION = ";SR
870  PRINT "VARIANCE = ";VR
880  PRINT " "
890  REM **ZSCORES,%ILE RANK**
900  IF C$ = "N" THEN  GOTO 1080
910  LET D = 0
```

```
]LIST920-1190

920  FOR I = 1 TO N
930  LET X =  ABS (A(I) - M)
940  LET D = D + X ^ 2
950  NEXT I
960  LET V = D / N
970  LET S =  SQR (V)
980  PRINT "RAW SCORE","Z-SCORE","%-ILE RANK"
990  FOR J = K TO 1 STEP  - 1
1000  LET Z = (J - M) / S
1010  LET P1 = (Z ^ 13 / 599040) - (Z ^ 11 / 42240) + (Z ^ 9 / 3456) - (Z
      ^ 7 / 336) + (Z ^ 5 / 40) - (Z ^ 3 / 6) + Z
1020  LET P2 = P1 / 2.506628 + 0.5
1030  LET PR =  INT (P2 * 100 + 0.5)
1040  LET ZR = ( INT (Z * 100 + 0.5)) / 100
1050  IF B(J) <  > 0 THEN  PRINT J,ZR,PR
1060  NEXT J
1070  IF B$ = "N" THEN  END
1080  LET SR =  INT (S * 100 + 0.5) / 100
1090  REM ***RELIAB & SEM****
1100  LET R1 = (K * V) - (M * (K - M))
1110  LET R2 = R1 / (V * (K - 1))
1120  LET RR =  INT (R2 * 100 + 0.5) / 100
1130  LET SM = S *  SQR (1 - R2)
1140  LET SE =  INT (SM * 100 + 0.5) / 100
1150  PRINT " "
1160  PRINT "THE KUDER-RICHARDSON 21 RELIABILITY =";RR
1170  PRINT "THE STANDARD ERROR OF MEASUREMENT = +/-";SE
1180  PR# 0
1190  END

]
```

```
SAMPLE SIZE (N) = 14

SCORE           FREQUENCY
33              1
32              1
30              1
27              2
26              3
25              1
22              1
21              1
19              2
15              1

MEAN= 24.86     MED.= 26
THE MODE = 26

STANDARD DEVIATION = 4.97
VARIANCE = 24.69

RAW SCORE       Z-SCORE         %-ILE RANK
33              1.64            95
32              1.44            92
30              1.03            85
27              .43             67
26              .23             59
25              .03             51
22              -.57            28
21              -.78            22
19              -1.18           12
15              -1.98           2

THE KUDER-RICHARDSON 21 RELIABILITY =.73
THE STANDARD ERROR OF MEASUREMENT = +/-2.59
```

Appendix E

SUMMARY OF PROCEDURES FOR APPROACH #3

1. Obtain technical assistance.
    a. funding
    b. sampling and psychometric expertise
    c. regional cooperation
    d. development team tasks
        (1) policy and design
        (2) test administration
        (3) development of norms
        (4) application guidelines
        (5) periodic revision of norms

2. Identify sample schools.

3. Identify representative random sample.

4. Administer Stanford-Binet and Woodcock Johnson Tests of Achievement.

5. Develop and validate local norms.

6. Adapt test manuals and scoring materials.

7. Update norms periodically.

Appendix F

ADVANTAGES AND DRAWBACKS OF APPROACHES 1, 2 & 3

Approach	Advantages	Drawbacks
1 & 2	a. promotes equal access	a. changes national norms
	b. uses in-place scores for referral	b. no rolling referrals
	c. uses locally available expertise	c. additional expense
	d. cost efficient locally	
	e. effective and efficient selection	
3	a. promotes equal access	a. changes national norms
	b. district or regional initiative	b. startup requirements
	c. norms good for 5-7 years	c. procedures complicated
	d. allows for rolling referrals	d. additional expense
	e. resembles standard evaluation practice	

Handout #1

EQUAL ACCESS AND STRONG SUPPORT FOR GIFTED PROGRAMS
(two categories of state effort on equal access)

CATEGORY I: SOMETHING

The following (5) states use "more subjective" means (4) to identify minority students or have adopted a definition (1*) that addresses the issue (late 1985):

AK, AR, IW, SD, WV*

Of these states, all require IEPs; 4 mandate programs and funds. Note that all these states are rural states.

CATEGORY II: NOTHING OR NEXT TO NOTHING

The following (28) states reported that they had no provisions for equal access in late 1985:

CO, DE, FL, GA, HI, ID, IN, KS, KY, ME, MD, MT, NB, NH,
NJ, NM, NY, NC, ND, OH, PA, RI, SC, TN, TX, UT, VT, WI

Of these states 21% require IEPs; 43% mandate programs and funds.

The following (10) states leave decisions about equal access to local agencies (late 1985 data):

CA, LA, MI, MN, MS, MO, OK, VA, WY, IL

Of these states 10% require IEPs; 30% mandate programs and funds.

The following (8) states appear to rely on the generic language of other programs to ensure equal access (late 1985 data):

AL, AZ, CN, DC, MA, NV, OR

Of these states, 1 (13%) requires IEPs; 2 (25%) mandate programs and funds.

Data source: Council of State Directors of Programs for the Gifted. (1986). The state of the states' gifted and talented education (2nd ed.). Author: Augusta, ME.

Data are based on reports from state coordinators; interpret data cautiously, as respondents' perceptions. View implications as tentative.

Presenter: Russell Hedge
Director, IECIP &
Willard Johnson

Infant and Early Childhood Intervention Program
University of Kansas Affiliated Facility
P.O. Box 738, Parsons, KS 67357

Serving Rural Families of Developmentally Disabled in a Cost-Effective Manner

The Kansas University Affiliated Facility (KUAF), at Parsons, is one of three UAF sites affiliated with the University of Kansas (the others are located in Lawrence and Kansas City). The KUAF receives federal funds for the purpose of providing exemplary services to developmentally disabled individuals as well as training for professionals seeking careers related to developmental disabilities. We will be discussing two of the programs included under the KUAF umbrella: The Infant and Early Childhood Intervention Program (IECIP) and the Respite Care Program.

Infant and Early Childhood Intervention Program

Developmentally delayed children create problems for their parents from the time of their birth. When the child has complex or numerous medical problems, does not start to walk or talk when he/she is supposed to, has problems eating, etc., the parenting role changes, and parents need help and answers.

Early identification and intervention has been effective in improving the progress and outcome for many DD children. If nothing else, it involves the child with persons who know how to work with the child to help him develop. According to Jorden, Hayden, Karnes and Wood (1977), programs providing early educational and therapeutic programming to meet the needs of young handicapped children and their families are reducing the number of children who will need intensive or long term help . . . with early help. In turn, these children can often function at higher levels than has been dreamed possible in prior years.

Unfortunately, early identification intervention programs are not readily available in rural Kansas. There is not a homogeneous group of DD children. Distance and cost are formidable barriers to program development. Parent groups are hard to establish. Access to the variety of professionals needed to effectively manage and program a DD child is limited. The IECIP is an attempt to address these problems.

The economy of rural Southeast Kansas is based on mining, farming and small business. In recent years, the mining business has collapsed and numerous farms and small businesses have failed. Historically, Southeast

Kansas never recovered from the great depression of the 1930s. Demographic data acquired from the office of Information Systems and Computing of the Kansas Department of Health and Environment for the years 1980 - 1985, present the following profile of this area of Kansas.

Southeast Kansas has the:

1) Highest unemployment rate in the state (17%);
2) Highest incidence of families below poverty level (11.4%);
3) Highest incidence of individuals below poverty level (15%);
4) Highest incidence of unemployed single parents with dependent children on public assistance;
5) Second highest incidence of families with dependent children on public assistance;
6) Highest incidence of teenage pregnancies (19.4%) compared to 11.7% which was the state's proportion of births of these young mothers;
7) Highest infant mortality rate in the state (9.1%);
8) Highest rate of recorded abortions (41.5%) for pregnant persons under 20 years of age;
9) Lowest index of adequate prenatal and postnatal care;
10) Highest drop-out rate in the state;
11) Highest incidence of illiterate persons;
12) Highest drug abuse rate;
13) Highest incidence of reported abused and neglected children;
14) Highest incidence of reported developmentally delayed children;
15) Highest incidence of premature births.

The problems of Southeast Kansas are compounded by the inability of this area to attract and keep qualified medical or educational professionals. Southeast Kansas has presented health hazards to its populace since the 1930s. Through the 1950s, Southeast Kansas had the highest incidence of tuberculosis and now the highest incidence of cancer in the state. According to National Environmental Agency, Southeast Kansas has the number one environmental health hazard in the nation--Tar Creek. At the same time, Southeast Kansas has the lowest density of qualified physicians, including obstetricians and gynecologists, to deal with those with medical problems.

Southeast Kansas has the largest stationary group of third generation welfare recipients in a four-state area including Missouri, Arkansas, Oklahoma and Kansas. Many of the families fail to promote appropriate prenatal and postnatal care for mother and child, to show responsibility for developing and maintaining a nurturing home environment for the child, and to take advantage of public education opportunities. Children in these homes frequently are delayed developmentally due to environmental as well as genetic and physiological causes. Their mothers receive inadequate prenatal and postnatal care. Most are raised by uneducated parents at home until they are sent to public school programs or institutionalized. By the time the child enters an educational program, his/her future has already been largely decided. An educational program alone cannot overcome the long-term effects of a family whose primary goal is subsistence.

Parents limited educationally and economically frequently have difficulty nurturing and teaching their disabled children born with intermittent or chronic medical complications. These parents cannot afford needed consistent medical attention. They do not understand the ramifications of a child's diagnosis and that the medical plan is designed to reach a successful and beneficial outcome for the child. Consequently, when their child needs medical help, they frequently do not schedule or keep medical appointments or follow prescribed interventions.

Programs for children with developmental delays, ages 0-6, in Southeast Kansas are extremely limited. The public schools have developed three special preschools in a 15-county area which deal with a small percentage of the special needs children, ages three years and older. Head Start Programs work only with 4-year-old and older children in Southeast Kansas. Only 10% of their case load can be developmentally delayed.

Although the needs of developmentally delayed children begin at birth, in many rural areas intervention programs are nonexistent for such children before age five. Programs providing early programming for young handicapped children and their families can reduce the number of children needing intensive or long-term help. The primary purpose of the Infant and Early Childhood Intervention Program was to develop a model service delivery system for fostering the health and development of young delayed children and unborn at-risk infants in economically deprived rural settings. The system involved infant and child development professionals who improve the overall development of a large number of young developmentally delayed children by traveling to the parents to teach them how to train their children. Procedures were developed to help parents of delayed infants and young children become viable, knowledgeable teachers, case managers and advocates. Such procedures will be disseminated to others serving delayed populations in similar locations.

The Infant and Early Childhood Intervention Program began as an interprofessional, interagency program between the KUAF and existing service agencies involved with developmentally delayed children and their families, in a sparsely populated, rural area of Southeast Kansas. The program involved the child's physician, county Public Health nurses, social and rehabilitative services social workers, public and independent school personnel, Mental Health Department psychologists and counselors, and the child's parents. Initially, we informed and trained each other in regard to functions and roles. The KUAF educated its sister agencies regarding the need to provide developmentally delayed children appropriate medical and educational procedures and therapies as soon after birth as possible.

We decided each agency would act as a broker for children initially identified by that agency. In other words, the agency would direct the children to other needed services provided by its sister agencies.

At first, KUAF staff were primarily interested in initiating procedures for identifying developmentally delayed or at-risk infants at birth; however, the other agencies expressed their concern with the needs of existing developmentally delayed children in their communities who were not receiving help. At that time (approximately 10 years go), in our region of the state, parents of even identifiable DD children, such as Downs Syndrome, were not informed of their child's problem until the child was two- to three-years old. Then, the child was directed to a state institution. Thus there was a need to provide services for children regardless of age.

We first attempted a transdisciplinary training and service model. The remnants of this model continue in the areas of behavioral management, social work, self help, early speech and language training, and parent involvement. However, today, the basic system has social workers doing social work, speech therapists training speech and language techniques, psychologist dealing with behavioral problems, and so on. The main persons actually involved in the transdisciplinary training are the child's parents.

Basic premises: Their are some 19 basic premises of the IECIP. These are as follows:

1) When parents think there is something wrong with his/her child, we will work with them to discover if there is a problem

2) Our purpose is not to diagnose or name the child's condition; we want to determine where the child is developmentally, identify and eliminate factors impeding the child's ability to develop, learn how to best teach the child, and take the child forward developmentally--we do not concern the parent with where the child should be.

3) It is important to initiate remediation on a developmental problem as early in a child's life as possible.

4) The child's parents are the authority on their child, and they are our peers; it is their responsibility to raise their child, not ours--we work with each other.

5) The child's parents, their attitudes, and the environment have the long-term overriding effect on the child's development and eventual outcome.

6) Parents do many things right for a special child without intervention.

7) Parents are capable of training DD children in most areas of learning with direction and information from other experienced professionals.

8) For continuity in long-term learning, for continuity of programming, for intensive training, for maintenance and generalization of learned skills, and for an affordable program, we believe the child's parents must become the teacher of their DD child.

9) We never tell the parents we will teach their child; we do train the parents what and how to teach their own child.

10) DD children have problems synthesizing the separate skills they are taught for effective application.

11) The most important need of a special child is environmental adaptation--to train the child to exist and function in his home environment (home, grocery stores, restaurants, movie theaters, churches, etc.. Next comes reading, writing and arithmetic

12) The child's rate of progress determines our objectives and goals; diagnoses and prognosis are kept tentative.

13) The child's improvement is based on time; the amount of time spent in one-on-one training experiences at the child's learning level is a crucial factor in determining the child's progress.

14) We are involved with the child for a long term; consequently, we emphasize continuity in programming.

15) Learning should take place where it can be maintained and generalized.

16) Programs which take the DD child away from the places and persons instrumental in the child's development are at best ineffective and at worst destructive; such programs attempt to serve the DD child under the guise that professionals can do it better than the parents and with the child being taught in situations limited in time and opportunities and separated from the natural environment--in some cases the parent is not even told what the child is being taught and parents are seldom involved in the training.

17) We disagree with the segregation of most DD children by their parents and educational systems from their environment and experiences with "normal" children. The appropriate model for a DD child is a normal child.

In turn, this is a good time for normal children to learn to understand and accept DD children.

18) In many special education systems, the DD child is taught how to succeed in school but not in his home environment or community. The parent is the child's main teacher of how to live outside an institution.

19) Our goal is to make the DD child a future functional independent, self-supporting adult.

Description of IECIP Services

The IECIP is an interdisciplinary and transdisciplinary approach serving the developmentally disabled population, primarily ages 0 to 6 years. The IECIP provides services in the areas of gross and fine perceptual-motor development, speech and language development, socialization, behavior management, self-help, environmental adaptation, and evaluation. The IECIP is available to the Southeast Kansas population at no charge. The IECIP is funded by the University of Kansas/Bureau of Child Research core grant and matching federal/state funds. The administrative cost of the program is approximately $200 per client, per year. This cost plus low travel to centrally located provision points for families makes the IECIP's parent training approach feasible and financially possible.

The total population served by the IECIP is approximately 350 DD children and their families. Diagnosis for some of the children involved in the IECIP are autism, cerebral palsy, Downs Syndrome, microcephalus, hydrocephalus, Ressell Syndrome, Williams Syndrome, Pierre Robin syndrome, as well as other known and unknown forms of developmental delay. The characteristics of the environment and population in Southeast Kansas predispose most of the children we work with to environmental neglect and delay. The program covers a region of 15 Southeast Kansas counties. There are 18 provision points (not counting home visits) in specific cities in the region where weekly or bimonthly contacts are made with the child and their parents. The program is held in the offices of county public health, mental health, social and rehabilitation agencies, hospitals, city halls, public/private schools and some homes.

The IECIP team travels into the catchment areas to the designated provision points to serve the individual child. In addition, when the child is ill, extremely young, or there are transportation problems, the IECIP staff provide services in their homes. This tends to alleviate the expense of travel that hinders center-based programs with lower socio-economic persons. Many low-income parents cannot afford travel or do not have transportation.

The IECIP model involves the development of parent competencies in implementation and evaluation of developmentally/behaviorally based intervention programs. Based on the principles of individualized programming, the trainer and parent develop the goals, techniques and materials for the child. The program is geared to the age of the child, chronologically, physically and emotionally. If a client is an infant, the program emphasizes motor, communication, and cognitive development. If the client is older, the program directs itself toward self-help, communication, sensorimotor integration, the interpretation of the environment, preparedness to become an adult, and school readiness. The program also directs its efforts toward aiding parents in handling the inappropriate disruptive behaviors of their children.

Services delivered are specific to the client's needs and disabilities. The gross/fine perceptual-motor component breaks the specific needs into two areas of contact--motor development and sensorimotor integration. Direct application of remediation is dependent under which level the client is functioning. The speech and language component encompasses the levels of pre-speech and receptive and expressive language, pre-academic readiness, and behavior management. The psychological component provides complete cognitive and adaptive behavior testing and instruction in behavioral management techniques for handling inappropriate and disruptive behaviors. The social work component offers parental counseling, behavior management techniques, respite care programs, and home-based intervention in crisis situations. The IECIP thus offers an interdisciplinary approach to the rural-base environment through four components.

Interactions between the IECIP staff, the child's physician, public health nurse and social worker extends the care of the DD child to involve his hygienic, medical, and welfare needs. Approximately 40% of the DD children referred to the IECIP come from the child's physician, public health offices, public schools or the social welfare systems. The majority of our referrals are via the parents of DD children we are presently working with or have helped in the past.

Following referral, the child is placed on the waiting list for his/her catchment area, or entered in the program at a time and place where the IECIP staff, the child and the child's parent(s) can consistently get together. The initial contact with the child and parent may last minutes to hours and the child's needs may be observed and evaluated by one or all the IECIP staff members with the help and input of the child's parents and other family members. The staff members' abilities to involve the child's parent(s) in the description of the his/her problems and needs is considered an important element in training them as the child's teacher. The parent leaves the initial meeting with an assignment involving the recording of observable behaviors important to determining the child's present level of motor development, communication, cognition, socialization, or the child's aberrant, counter-productive activities considered in conflict with the child's growth and development, as well as a few specific training goals and techniques to use daily with the child.

The above system involves the parent(s) immediately in the description of their child's developmental problems and procedures they can do to improve their child's development. The staff member must meet three criteria when he makes an assignment. One, the assignment must offer observable improvement in the child's development; two, the assignment must be something the parent can do; and three--and most importantly--the assignment must be something the child can do. These three criteria result in a feasible, practical and workable program for the child.

After the initial meeting, trainers, parent(s), and child meet weekly or bi-weekly. To achieve program criterion, each meeting with the child and parent involves essentially the following format. The child, parent and staff member discuss and evaluate together the success or failure of the last assignment. The staff member asks the child's parents about their experiences with the past assignment, often having the parent demonstrate the procedures they have consistently performed with their child. This procedure tells the staff member if the parent has been doing the assignment and how the parent has been doing the assignment.

Young children often perform better with their parents working with them, thus allowing the staff member to observe where the child is, as well as what problems the parent(s) is having working with their child. The staff member tells the parent what the parent has accomplished with the child. The parent and the staff member then work with the child to determine whether to continue the present assignment, change the assignment, because the procedure is not working or move to the next level of training. The staff member discusses the purpose of the next assignment, models and explains the criteria for successfully performing the procedure, and practices the procedure with the parent working with the child until both know what will be happening to the child until the next meeting.

To insure understanding and application of the assignments, the staff member is on call to the parent by phone or in person. Before the parents leave the meeting, they are given a written description of the assignment, as well as any materials they will need, (not available in the home) for doing the assignment. Often materials are made by the parent and staff member for the child. We have found parents and their child use more consistently and take better care of materials they help make. The parent tends to become self sufficient in meeting the needs of the child and less dependent on others.

Contact between the staff member, child and parent is intense, with particular emphasis on educating the parent on the specific problems of their child, defined over time by the IECIP staff and the child's parents. The parent is the focal point of therapy with the particular child. They determine what, how, and how much will be done. Grossly, we find parents able to consistently achieve more over a long period of time with their child than any other present system.

The home and community environment becomes the child's therapy room. The parents become the child's developmental specialists--teacher, case manager and advocate. By working with parents, the IECIP staff is able to affect many more children than they could working individually with a child, thus increasing the number of children helped in the catchment without a concomitant increase in numbers of hired professionals. Each of the IECIP staff members is impressed with the greater growth in child development (over time) with the parent being the trainer than was ever expected when working with individual children in private, public or university therapy programs.

Support Programs for DD Children

KUAF at Parsons personnel have developed cooperative services for DD children and their families with Kansas Crippled Children (KCC) and Parsons State Hospital and Training Center (PSHTC). Each month, the KUAF at Parsons and PSHTC offer free audiological screening involving puretone threshold testing, tympanography and localization testing with noisemakers for any child suspected of having problems in the 15-county catchment area. The KUAF and KCC provide a bi-monthly orthopaedic clinic involving orthopaedic surgeons, nutritionists, prosthetic specialists, physical therapists and social workers. The KCC program also provide genetic counseling and pediatric cardiology.

Over the ten years the IECIP has been in existence, the staff of the program, with the first-hand help of the parents of DD children, have developed a listing of professionals in the area who are willing and capable of treating children with special problems. This list includes dentists, orthodontists, pediatricians, pediatric allergists, optometrists, otorhinolaryngologists and audiologists. The appropriate management as well as the diagnosis and treatment of the recurrent and special medical problems of DD children is a major factor affecting child development.

Respite Care Program

In addition to the services provided by the IECIP, the UAF's Respite Care Program offers another set of important services to parents of handicapped children in Southeastern Kansas. The purpose of the KUAF Respite Care Program is to provide those persons responsible for the care of developmentally disabled individuals with intermittent, brief periods of relief or time off from the heavy demands and constant stress of caring for their disabled child or adult. Respite care offers not only relief to the family, it provides for growth, development and normalizing experiences for the disabled individual through interaction with others in the community. It is the intent of the respite service program to reduce the need for institutional or other out-of-home placements, while strengthening the coping abilities of families and improving the quality of family life.

Since 1982, the KUAF Respite Program has provided community-based respite in the rural counties of Southeast Kansas. The substantial and rapid growth of the program demonstrates the need for community-based respite and the ability of professionals in the field of special education to recruit, train and place volunteers in temporary caregiver roles. Consequently, the families can have planned time for recreation or renewal activities as well as time to attend to emergencies. The two types of respite offered through the program are:

> Companion/sitter service--trained persons provide care in the disabled client's home;
>
> Respite care home--trained persons provide care in their homes, which are state licensed.

Recruitment. Mass media campaigns are used to recruit potential providers and inform families with disabled members about respite. Most of the campaign is conducted utilizing no-cost forms of advertising, such as a) public-service announcements through radio and television, b) news releases and feature stories in newspapers, c) interviews on radio talk shows, and d) presentations to community, church and school organizations. The only types of paid advertising used to date are a) posters announcing the respite services and upcoming provider training workshops, b) brochures describing the program, and c) mass mailings to education, social service, health care, and church personnel.

Training. Providers must be at least 18 years of age and volunteer time to training preparation for respite. The training provided through the KUAF Respite Program includes an all-day workshop and "hands-on" training experiences. In addition, once a family requests respite and a provider agrees to provide the care, the provider is obligated to train with that family until the family and provider are satisfied that the provider will be able to competently meet the care requirements for the disabled person. Additional requirements include health and security clearances, letters of reference, and a screening interview conducted by the Respite Care Coordinator to determine the applicant's willingness and ability to provide respite and current skill levels. Potential providers are responsible for obtaining Cardio-Pulmonary-Resuscitation (CPR) Certification through community agencies offering such training (such as the American Red Cross).

How the KUAF respite program works. Parents are asked to enroll their son/daughter in the program prior to requesting respite. This assures that the specific care needs of the disabled individual are well known so providers can be adequately trained. Once enrolled, the family calls the Respite Care Coordinator (using the toll-free number) to request respite. The coordinator then contacts a provider and arranges for the service. After the placement is agreed upon by the parents, provider and coordinator, a pre-placement visit is arranged in preparation for the respite.

Following respite sessions, providers are reimbursed for their services and both the providers and the parents are asked to complete evaluations on the placement. Payments do not occur directly between families and providers. The provider submits a bill to the coordinator and receives payment through the program. The program bills the family for the services based on the financial agreement determined when the family enrolls. A sliding scale is used to determine family fees for services.

Program funding. The budget of the KUAF Respite Program consists of two components--organizational and direct-service funding. In regard to organizational funding, the program is sponsored by the Kansas University Affiliated Facility at Parsons which supports the program in cooperation with the Parsons State Hospital and Training Center through the contribution of all organizational, administrative and supply costs. As for the direct service funding, donated monies and family fees for services are used to pay for the direct costs of providing respite to clients. This includes incentive fees to providers at a rate of $3.00 per hour for 1 - 7 hours of respite or a flat rate of $25 for each 8- to 24-hour session plus mileage reimbursement to providers who must travel out of their home community to provide respite. Providers are self-employed, contracting with the program to provide services, and are not employees of the University.

Start-up funds for the program were provided by the Frederic L. Girardeau Memorial Fund which is administered through the University of Kansas Endowment Association. This trust fund was designated to support community-based services for developmentally disabled individuals. In addition, respite services have been supported through the generous contributions of individuals, industry and community organizations, and family fees for services.

Program growth and replication of services. Respite services are now available for the families of developmentally disabled individuals in six rural Kansas counties, with 21 sitter/companions providing respite for 42 disabled clients. The number of hours of respite provided has increased from 60 hours in 1982 to 2,385 for 1985. The goal of the program is to make respite available in a 9-county area to any family with a handicapped member requesting the service. As each area is targeted for recruitment and fund raising, the initial steps for implementing and supporting the program are replicated.

Future Directions

We plan to continue our IECIP service model in the future, but anticipate diversifying in some significant ways. Many of the diversifications will be designed to meet our responsibilities as a UAF--to develop "state-of-the-art" services and to communicate our methods to a broad audience of individuals involved with handicapped children. In addition, there will be some changes related to the Respite Care Program.

One activity we will undertake in the future involves a research project designed to compare the effectiveness of the parent-directed model we have developed to the more traditional therapy model used in the public schools. While only in the planning stages, the project will involve two studies--one involving speech services and one involving motor development. Public school speech and physical therapists will treat some children using the parent-directed model and some using the traditional model. Outcome data will be collected in order to determine which of the models appears more effective.

To demonstrate the replicability of the service model, we are planning to help initiate similar services in a region of the state which we currently do not serve. Therapists and teachers in that region will be assisted in learning to provide parent-directed services by IECIP staff. We feel that it is important to determine if the philosophy and methods which we have found so effective can be used by other professionals.

Based on the results we have achieved to date, and on anticipated success in the two projects described above, we will be making an effort to communicate the details of the parent-directed model to audiences on a state and national level. We intend to attend state, regional and national conferences of professional organizations to discuss the merits of the parent-directed approach. In the future, we will be videotaping examples of our sessions with the clients and their parents to illustrate the procedures and styles we use in encouraging and teaching parents to work with their handicapped children. We are also considering the possibility of conducting training workshops for professionals attending conferences. In regard to professional journals, we intend to submit articles detailing the philosophy of the program, the procedures we use, and the results of the research project mentioned above.

Along this same theme, we feel a need to provide additional practicum opportunities for students studying speech and hearing, adaptive physical education, physical therapy, psychology, special education, etc. While we have done some such training in the past, we intend to increase the level in the future (i.e., more students and longer practica).

Still in the planning stages is a potential project designed to demonstrate the feasibility of a parent-training program for decreasing the risk of developmental delay among infants conceived, born and raised in poverty conditions in rural areas, such as Southeastern Kansas. The components of such a program would include: prenatal identification; professionals as parent trainers and consultants; parent-aides; parent-training classes; parent support group; community outings; parent competency demonstration. In addition to our current staff, this project would involve the addition of six Parent-Aides and a Nurse who would serve as the Parent-Aide supervisor and medical representative of the transdisciplinary team.

In regard to the Respite Care Program, we are seeking greater levels of community financial support for the incentive reimbursements paid to providers. While administration of the program will continue to be provided through UAF funds, we will be seeking to raise enough donations from community, civic and church organizations, industry, business and individuals to cover the funds budgeted for provider payment.

Finally, we plan to carefully review the current training program for respite providers. While most of the topic areas appear appropriate, we would like to convert the training to a competency-based mode. This would help to insure that new providers do, indeed, acquire the skills that we are attempting to teach.

In summary, we are quite encouraged by the success of our current programs and intend to continue them in much their present form. Our plans for the future include at least one systematic research project related to the effectiveness of the parent-directed approach, a replication of the service model in another region of the state, the provision of additional student practicum activities, increased dissemination activities, changes in the respite provider training program, and the development of more community support for the provider payment portion of the Respite Care Program.

Jorden, J., Hayden, A., Karnes, M., & Wood (1977). *Early childhood education for exceptional children*. Reston, VA: Council for Exceptional Children.

CONCURRENT SESSIONS

WEDNESDAY, MARCH 18, 1987

1:30 - 2:30 PM

VOCATIONAL PLANNING & ASSESSMENT

RURAL MODEL

VOCATIONAL TRANSITION PROGRAMMING

Karen K. Newman
CCES Coordinator
118 So. Az. St. -
Basement
Bisbee, Az. 85603

PURPOSE:

Outline for the natural integration of Vocational Education and Special Education. The Education of the Handicapped Act established procedures for planning and implementing Individual Education Programs (I. E. P.'s) and the Carl Perkins Vocational Education Act established procedures for evaluating, planning programs, and implementing Individual Vocational Education Plans (I. V. E. P.'s) to facilitate the transition from school to post school employment/career opportunities for vocational students. See Outline of P. L. 98-524 on Page 2. The primary focus, at this time, is with the vocational program planning for Handicapped and Disadvantaged students.

BACKGROUND:

Cochise County Educational Services (Cochise County School Superintendent) provides Special Education Support Staff and Administrative Support to Small and Isolated School Districts (total of 20) in Cochise County. See Map on Page 3. Six of the School Districts have High School Programs. The Arizona State Department of Education now has Vocational Standards for the Handicapped and Disadvantaged (9-12 grades) with the following functions:

1. Guidance Function - information on vocational opportunities
   vocational assessments
   completing I. V. E. P.
   promoting entry into non-traditional programs
2. Instruction Function - consultation with vocational teachers
   instructional strategies/modifications
   following I. V. E. P. components/competencies
3. Placement/Tracking Function - placement opportunities
   tracking/documentation of placements and progress
4. Articulation Function - instructional strategies with staff members
   employment needs of students with staff members
   available community services with staff members and parents
   local district advisory committee input and advice for school program

See Page 4 for sample of these Standards.

UNIQUE NEEDS:

Cochise County has the following unique needs:

Small student enrollments (104 - 380) - Average Daily membership, K -12
Limited number of vocational teachers and staff members
Limited (if any) vocational counseling services
Expanded distances between communities and existing services
Need for a Vocational Counselor to travel to each High School Program to implement the Transition Program and to network with Agencies and Cochise College

P.L. 98-524 OF TITLE II

CARL D. PERKINS VOCATIONAL EDUCATION ACT
1984

GOAL

FACILITATE TRANSITION FROM SCHOOL TO POST-SCHOOL EMPLOYMENT/CAREER OPPORTUNITIES

↑

VOCATIONAL EDUCATION AND/OR VOCATIONAL REHABILITION
(Direct Service) (Reimbursement and/or consultant services)

Handicapped students in vocational education shall receive vocational assessment (Determine vocational interests, abilities, needs)

SPECIAL EDUCATION

Documentation in the MDC/IEP of any adaptation of curriculum/instruction/equipment/facilities to meet the needs of the handicapped students in special education

COUNSELING/GUIDANCE/CAREER DEVELOPMENT ACTIVITIES CONDUCTED BY COUNSELORS TRAINED IN SPECIAL EDUCATION SERVICES

↑

LEA shall provide information to handicapped students and programs of:

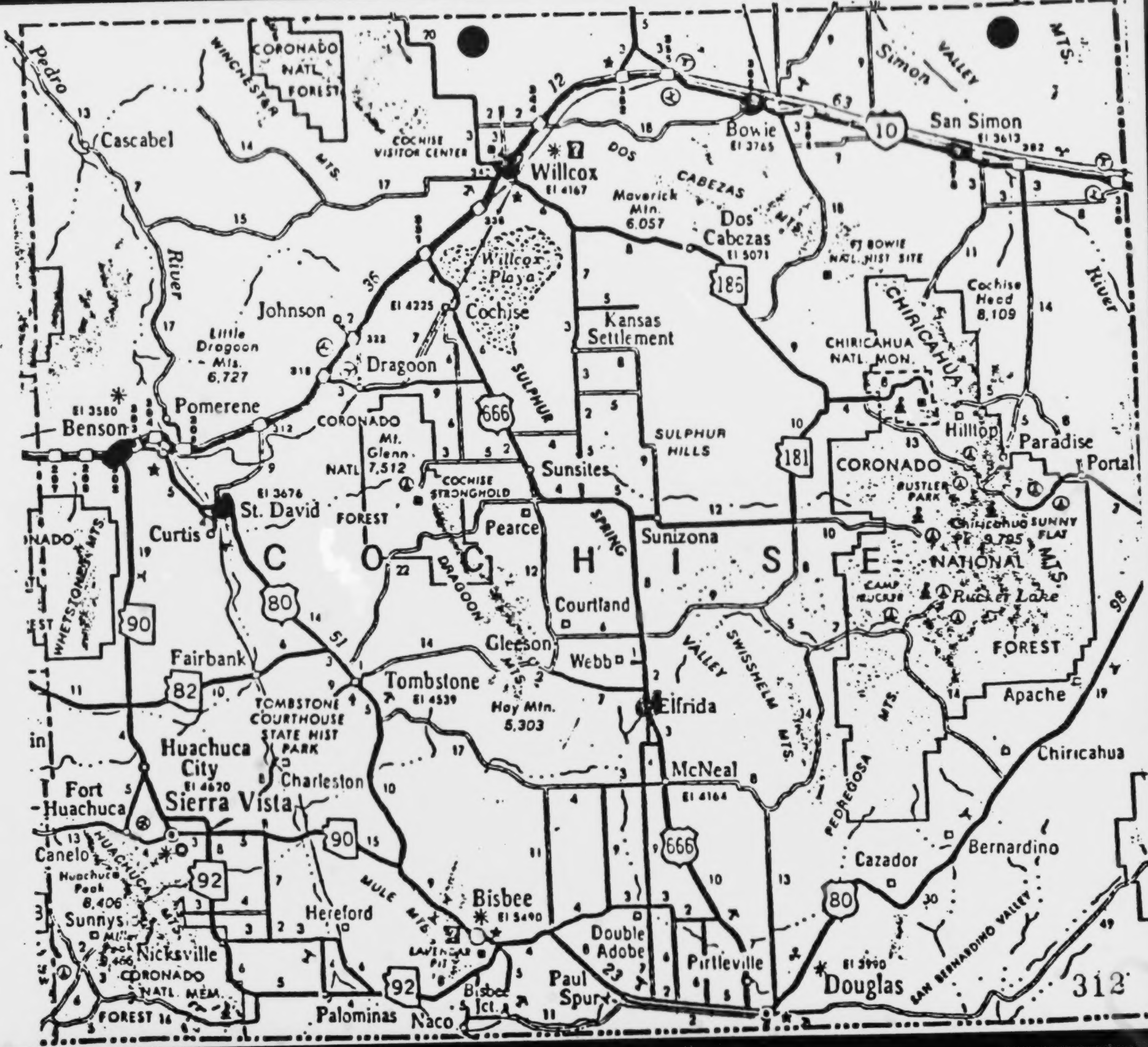
1) available opportunities in vocational education no later than beginning 9th grade; and
2) requirements for enrollment.

↑

STATE BOARD shall provide equal access to the full range of vocational programs available to non-handicapped, including:

1) Occupationally specific courses of study;
2) cooperative education; and
3) apprenticeship programs.

→ within the least restrictive environment → Coordinated by
Vocational Education
and
Special Education


COCHISE
Pedro
River
Cascabel
CORONADO NATL FOREST
WINCHESTER MTS.
COCHISE VISITOR CENTER
Willcox
El 4167
DOS CABEZAS MTS.
Maverick Mtn. 6,057
Dos Cabezas
El 5071
Bowie
El 3765
San Simon
El 3613
Simon VALLEY
MTS.
River
FT BOWIE NATL HIST SITE
Willcox Playa
Cochise
El 4225
Johnson
Little Dragoon Mts. 6,727
Dragoon
Kansas Settlement
SULPHUR
SULPHUR HILLS
CHIRICAHUA NATL. MON.
CHIRICAHUA
Cochise Head 8,109
Hilltop
Paradise
Portal
Benson
El 3580
Pomerene
CORONADO
Mt. Glenn 7,512
NATL
FOREST
COCHISE STRONGHOLD
St. David
El 3676
Curtis
Sunsites
Pearce
Sunizona
SPRING
RUSTLER PARK
Chiricahua Pk 9,795
SUNNY FLAT
NATIONAL
CAMP RUCKER
Rucker Lake
FOREST
WHETSTONE MTS.
DRAGOON MTS.
Courtland
Gleeson
Webb
Fairbank
Tombstone
El 4539
TOMBSTONE COURTHOUSE STATE HIST PARK
Hoy Mtn. 5,303
Elfrida
VALLEY
SWISSHELM MTS.
PEDREGOSA MTS.
Apache
Chiricahua
Huachuca City
El 4620
Charleston
Fort Huachuca
Sierra Vista
McNeal
El 4164
Canelo
HUACHUCA MTS.
Huachuca Peak 8,406
Sunnyside
Miller Peak 9,466
Nicksville
CORONADO NATL. MEM.
FOREST
Hereford
MULE MTS.
Bisbee
El 5490
LAVENDAR PIT
Double Adobe
Pirtleville
Cazador
Bernardino
Douglas
El 3990
SAN BERNARDINO VALLEY
Paul Spur
Bisbee Jct.
Palominas
Naco
10
63
12
36
666
186
181
80
82
90
92
98
23
51

VOCATIONAL GUIDANCE AND COUNSELING

11.0 Special Needs Populations (Handicapped and Disadvantaged) to ensure that all students will develop to their fullest potential

11.1 Vocational Assessment	11.2 Disadvantaged (Academically and/or economically disadvantaged)	11.3 Handicapped	11.4 Individualized Education Program	11.5 Enrollment	11.6 Teacher Preparation	11.7 Instructional Assistance
List of special needs students. Review of each vocational assessment (interests/ attitudes/ abilities (IEP/IVEP)	Documentation of services/assistance being offered as identified in IEP/IVEP.	Documentation of services/assistance being offered as identified in IEP/IVEP.	Documentation of modification of course competencies. Modified list of program competencies.	Compare list of special needs students with special need students enrolled in course (IEP must be prepared before enrollment)	Documentation of teacher input into preparation of the IEP/IVEP.	Evidence that teachers receive information to carry out special services indicated on IVEP.

Documentation Needed:	Yes	No	Item(s) Needed	Person(s) Responsible
11.1 Vocational Assessment				
11.2 Disadvantaged				
11.3 Handicapped				
11.4 Individualized Education Program				
11.5 Enrollment				
11.6 Teacher Preparation				
11.7 Instructional Support				

PROGRAM OBJECTIVES AND OUTCOMES:

See Outline on Page 6.

ESSENTIAL COMPONENTS:

See Outline on Page 7.

ASSESSMENT RESOURCES:

Measuring Worker Traits (Field & Orgar) - Resource Book.
VSB, P.O. Box 1945, Athens, Ga., 30603.

Micro-Skills - Inventory and Occupational Match - Software.
Ariz., Center for Vocational Ed., Box 6025, Flagstaff, Az., 86011.

T.A.R.G.E.T. (Technical Analysis Reports for Guidance in Education and Training) - Carl Perkins, I.V.E.P.'s, Report Writing, Classroom Strategies, and Student Scheduling. P.I.C. (Pictorial Inventory of Careers).
New Concepts, 1161 N. El Dorado Pl., Suite 343, Tucson, Az., 85715.
See sample on Page 8.

W.R.I.O.T. - Pictorial Interest Test for Educationally & Culturally Disadvantaged.
Jastak Assoc., Inc., 1526 Gilpin Ave., Wilmington, DE, 19806.

FUNDING SOURCES:

Title VI-B - Discretionary Funds for the Handicapped

State Vocational Monies - Discretionary Model Projects, Handicapped and Disadvantages, and County/Area Planning. See Sample Project on Page 9.

Assessments of Member Schools in the Educational Services Cooperative.

Small School District Monies - Arizona Senate Bill 1077.

PRACTICAL IMPLICATIONS:

Meeting State and Federal Vocational Standards allows the flow of vocational funds along with the meeting of the North Central Accreditation Standards (certified counselor). Combining the State funds available allows Cochise County Educational Services to hire a certified Vocational/Special Needs Counselor. This Counselor will coordinate the delivery of the four function area services which will directly benefit students within each school site.

8.1.1 RURAL AREA MODEL (Secondary)

OBJECTIVES	OUTCOMES	TARGET AUDIENCE	BEGINNING AND ENDING DATES	EVALUATION/DOCUMENTATION METHODS
Vocational Course information disseminated to 8th Graders and their parents	Awareness of vailable vocational courses. Promoting entry into non-traditional courses.	8th Graders	July 1, 1986 - June 30, 1987	List of courses in Handbook or Newsletter or Student Orientation.
Vocational Assessments (11th-12th graders first)	Assessment Profile	11th - 12th Graders	"	Profile of Student
Develop I.V.E.P./Career Guidance	I.V.E.P. Document	"	"	I.V.E.P.
Consultation with Vocational Staff	Curriulum modification if needed plus workshops on job applications, resumes...	Staff	"	In-Service/visitations with Staff Dates of Workshops
Review of Vocational competencies	Meeting ADE Standards	Staff	"	Competency-based course outlines used to record student progress and to evaluate student learning
Developing on/off campus employment opportunities	Job sites and required skills	11th - 12th Graders	"	List of Job Sites
Job Placements	Skill development and career choices	" (16CA +)	"	Documentation of Placements
Articulation with community agencies, College, & Parents	Articulation and cooperation	Staff	"	Dates of meetings and outcomes
Tracking System	Follow-up information	Graduates	"	Documentation of placements after graduation

ESSENTIAL COMPONENTS FOR MODEL TRANSITION PROGRAM

AREA(S)	CAREER ASSESSMENT	CAREER AWARENESS	VOCATIONAL COURSES AT SCHOOL SITE	NON-TRADITIONAL OCCUPATIONS	CAREER-MATCH	OUTCOME
	Profile of Student	Outline of skills required Community jobs available Training programs beyond high school	Requirements for each	Requirements for each Community speakers Expression of self-interests	Choices Review of skills/ training required Community options available	I.V.E.P.
PERSON(S) RESPONSIBLE	COUNSELOR	TEACHER/ COUNSELOR	School Printed outline and/or meeting with parents	TEACHER/ COUNSELOR	STUDENT	TEACHER/PARENT

AREA(S)	ON-THE-JOB TRAINING	COMMUNITY RESOURCES	COMMUNITY PLACEMENT AFTER GRADUATION	OUTCOME
	School and Community Sites (Example: one to two hours per day)	Agencies: Voc Rehab, DDD, JTPA, Skill Centers, Cochise Private Industry Council, Cochise College Community Services, SSI, etc... Schooling: Further training sites, community colleges, technical schools, etc...	Agency Referrals Link with training/education Sites Job Placements	Tracking System
PERSON(S) RESPONSIBLE	COUNSELOR/ TEACHER	TEACHER/COUNSELOR COMMUNITY AGENCY REPRESENTATIVES	TEACHER/COUNSELOR STUDENT/PARENT	SCHOOL STAFF

CARL PERKINS REQUIREMENTS CHART

Law Requires:	Student T.A.R.G.E.T.™ Provides:
Information to students and parents concerning opportunities available in vocational education for enrollment no later than the ninth grade.	A listing of all vocational courses offered in the district. Plans all required prerequisite and vocational courses for up to four years.
An assessment of interests, abilities and special needs of that student with respect to successfully completing the vocational education program.	Analyzes student academic areas of remediation. Provides suggested areas of remediation.
Special services, including adaptation of curriculum, instruction, equipment and facilities designed to meet students' needs.	Suggests academic areas of remediation of reading, language and math. Suggests teaching strategies in identified areas of handicap and disadvantage. Suggests classroom adaptations for physical handicaps.
Guidance, counseling and career development activities conducted by professionally trained counselors.	Allows the user to establish the basic academic pre-vocational and vocational courses needed to develop an IVEP.
Counselor's services designed to facilitate the transition from school to post-school employment and career opportunities.	Guidance information on the level of academic education needed for job entry.
Demographic information for funding and reporting purposes.	Identification of disadvantaged students. Cumulative records on disadvantaged and handicapped students. Documentation of vocational areas identified by students. Comparison of expressed interest and vocational offerings.

In summary, Student T.A.R.G.E.T.™ simplifies interpreting ALL the cumbersome data of individualized vocational educational planning for users.

PLANNING PROJECT '86 - '87

FUNDING TOPIC: 1.1.F HANDICAPPED FUNDING

FUNDING FOCUS: HANDICAPPED ENTER AND SUCCEED IN REGULAR VOCATIONAL PROGRAMS (With Modifications If Needed) LEADING TOWARD EMPLOYMENT

CRITERIA	OBJECTIVES	OUTCOMES	TARGET AUDIENCE	BEGINNING DATE	ENDING DATE	EVALUATION METHOD
1. GUIDANCE FUNCTION	1.1 Provide Handicapped students/parents information on vocational opportunities and requirements	1.1 Develop and disseminate printed information	Identified handicapped students 8th grade to entry into 9th- and parents	8 - '86	6 - '87	1.1 Copy of printed information and documentation of giving to students/parents (Ex. Using vehicle of IEP Meeting)
	1.2 Assessment of handicapped students interests/abilities/needs	1.2 Vocational recommendations for IVEP	9th - 11th graders	"	"	1.2 Computer Profile of each individual student
	1.3 Conference with parents to agree on vocational goals	1.3 Development of IVEP (Long/Short range goals) plus scheduling of appropriate vocational classes	9th - 11th graders	"	"	1.3 IVEP Document (Ex. Using vehicle of IEP Meeting)
	1.4 Promoting entry of handicapped students and female students into non-traditional courses	1.4 Expanding career options and equal opportunities for handicapped and female students	9th - 12th graders	"	"	1.4 Copy of schedules plus documentation of grades in vocational courses
2. INSTRUCTION FUNCTION	2.1 Consultation with vocational teachers concerning needs of handicapped students	2.1 Providing results of IVEP and instructional modifications/strategies (sequential steps/modification of time lines/peer tutors/adapting equipment)	9th - 12th graders	"	"	2.1 Copy of IVEP given to vocational teachers plus documentation of classroom visitations/teacher conferences
3. PLACEMENT/TRACKING FUNCTION	3.1 Provide Placement - Employment or post-secondary opportunities for the handicapped	3.1 Employment placement on/off campus plus summer work programs	11th - 12th graders Post-Secondary	"	"	3.1 Documentation of placements plus coordination with other agencies
	3.2 Tracking of handicapped students	3.2 Follow-up communication with students/employers	11th - 12th graders Post-Secondary	"	"	3.2 Copy of written communication
	3.3 Articulation with vocational teachers and staff	3.3 Integration/communication with all staff members (verification of instructional strategies	Staff	"	"	3.3 Dates of Conferences/Inservice Meetings

Patrick Pritchard

Fair Play Wilderness Camp School: A Therapeutic Camping Program for Emotionally Handicapped Adolescent Boys

Fair Play Wilderness Camp School began in the early 1970's as a dream. Two men with a desire to help boys in trouble commited themselves to one day starting a program where problem boys could live together in small groups with "big brother" counselors in a wilderness setting and learn what life is all about. In 1980 with eighty acres of land in the South Carolina Piedmont, two problem boys and one counselor their dream became a reality. None of the staff were professional child care workers. Their chief qualifications were that they had numerous years of experience in loving, supportive families and strong convictions about service to their fellow men. Their guidebook was a 1965 publication by Campbell Loughmiller entitled, Wilderness Road. Dr. Loughmiller is the founder of the Salesmanship Club Boys Camp of Texas and his book has become a bible for therapeutic camping programs across the country. Since it's beginning in 1980 Fair Play Wilderness Camp School has grown from two boys and one counselor to forty boys, eight voluntary service counselors and fifteen paid staff members.

Life at Fair Play Wilderness Camp School is characterized as a community endeavor in living and learning. The program is designed to help boys who are struggling with serious personal problems and have not found help in their homes, schools and communities. Many of the boys have severe discipline and self-image problems and refuse to accept any responsibility for their actions. While the students are at camp they will discover that one of the causes of their problems, peer pressure, will now be used to help lead them out of their problems and into new, more benificial life patterns.

Every evening each group of ten boys and two counselors meet to talk about their problems and feelings toward themselves and others in the group. The counselors, acting not as authority figures but more as senior members of the group, seek to guide their group in it's discussion and urge the boys to air their feelings and accept the feelings of others. Group meetings, or *huddle-ups*, can be called by any member of the group at any time during the day when a feeling or reaction has lodged in him and the anxiety, tension and mistrust has to be cleared. The group meetings give each member an opportunity to express his emotions and help deal with frustration in a productive manner.

Each group is responsible for it's own campsite...the building of each tent and the general maintenance of the campsite.

Each group has a set of objectives. After the initial acceptance into the group each member of the group establishes goals for himself. With the continuing support of his group. the counselors and the central staff, each boy is assured the undeniable right to work toward his potential.

Life skills education is presented by group participation in building and maintaining their own shelters, planning menus for the week within the individual group's budget and organizing trips for the group. Formal academic schooling is held in one of the permanent structures on campus and is coordinated by a teacher certified in teaching the emotionally handicapped. Classes are small, thus allowing each student individual attention.

When a boy first comes to camp he is on Level 1 of the program. After receiving his Crest he is moved to Level 2. After achieving Level 2 a boy is eligible to attend one class per day. The Crest is a cloth symbol which is awarded to a boy after he has made a conscientious effort toward attaining his first three goals set when he entered the camp program. There are a total of seven levels a boy needs to attain before he graduates from the program. By the time a boy reaches Level 6, he will be in the classrooms six periods per day.

One unique aspect of Fair Play Wilderness Camp School is the way in which the private sector, the public school system and public child care agencies have worked together to make it a successful program. A private, non-profit corporation manages the program and the local school district provides the certified special education teacher to insure that the clients receive adequate academic instruction. In exchange, the school district is allowed several placements each year. Department of Social Services and other agencies place their clients at the camp on a contractual basis for a one to one and a half year basis. According to Department of Social Services criteria, Fair Play Wilderness Camp School has about a 90% success rate over a six year period. All the above agencies have worked together to provide a unique service that any one agency working alone could not have provided.

References

Portions of this article are taken from the pamphlet entitled, *Fair Play Wilderness Camp School: Giving Boys a New Outlook in Life*.

Loughmiller, Campbell. *Wilderness Road*. 1965, The Hogg Foundation for Mental Health, The University of Texas at Austin.

Program Components

The following section details the program components of the Fair Play Wilderness Camp.

1.0 Daily Living Skills

At the Fair Play Wilderness Camp School, we see the acquisition of daily living skills as being essential to the future success of our clients. We inplement and teach these skills through the structure which is complimentary to the entire program.

1.1 Personal Hygiene

In our program, we stress cleanliness because of the attitudes it helps one develop towards self and others. It is of great importance that each youth acquire these skills in order to retain a positive self-image after graduation.

Each client takes a shower on a daily basis. They change into clean clothes after each shower. Teeth are brushed each morning before leaving campsite and again each evening before pow-wow.

1.2 Daily Campsite Chores

Daily routine is important as it helps establish a sense of order in an emotionally handicapped youth. We stress to our youths that an orderly environment is more likely to produce positive behavior.

Each morning every youth participates in tent chores which involve making the bed complete with hospital corners and a white collar. They also sweep out the tent and check to make sure that footlockers are neat.

After tent chores are completed, they will do campsite chores which include the raking of trails, cleaning the lanterns and building the pow-wow fire.

1.3 Cooking

Cookout occurs at each campsite two days per week. The clients participate in ordering and cooking the food. This is very important as many of our clients do not understand the importance of eating a well-balanced meal. They follow USDA regulations when ordering their food. They also learn to budget money through this activity as they are allocated a certain amount of money per meal.

1.4 Daily Planning

The clients in our program have the pleasure and responsibility to plan their group activities. This helps them to plan and organize their activities in such a way that goals and objectives can be met. It also helps them achieve a sense of pride in work well done.

1.5 Trips (Hiking & Caoneing)

We encourage our groups to become involved extensively in tripping. This activity helps achieve goals in numerous areas. First of all, it is an educational activity that is motivating and enjoyable to the youths. It also helps our clients to do long-term planning. They learn how to utilize community and government resources to gain the needed information for their trip.

1.6 Laundrying Clothes

Each week our clients have the opportunity to utilize a local laundromat and learn how to appropriately clean their clothes. Going to the laundromat also allows them an opportunity to learn how to use the needed appliances.

1.7 Health/Fitness

It should be noted that our clients are generally in good health. This can be attributed to the rigorous outdoor activity that our groups participate in, eating well balanced meals and the general emphasis that is placed on health and fitness. This helps our clients achieve a positive self-image and teaches them solid work-related habits.

1.8 Adult Role Model

Our primary resource for transmitting these daily living skills is our counselors. Our counselors are young men who have established excellent work habits and are highly motivated and creative. As they establish a personal relationship with the boys, these traits begin to be transmitted which in turn helps the groups to retain a positive peer pressure. These young men also have an obvious sense of committment to the program and the individual clients which is generally something new for the boys; it is a very needed ingredient as it provides security.

2.0 Personal/Social Skills

The clients we serve at Fair Play Wilderness Camp School are most always deficient in the area of personal/social skills. Many of them have severe emotional disturbances and do not know how to relate to people in an appropriate manner. Acting out beahvior is a mere symptom in most of the cases we deal with and must, therefore, be tolerated and dealt with in a relaxed and controlled manner. Our objective is to help these youths to achieve these much needed skills in order to survive in their respective environments. We meet this objective through various group processes.

2.1 Evaluation

Evaluation is an on-going process in our program. Routine evaluation sessions are held each day to analyze the group and how each one in the group is functioning. Each member has the privilege to give his opinion and idea on the issue being discussed.

Behavioral limits and expectations are set by the group during these sessions. They will then evaluate their performance on an individual and group basis at the next session. This encourages each youth to achieve self-awareness and awareness of others and what is occurring in his environment.

Growing in self-awareness is a process which requires persistent effort from the individual client. Evaluation by his peers on his performance produces motivation to become more aware of his behaviors and attitudes.

2.2 Pow-wow

Pow-wow is a routine group process which occurs at the end of every day. It is a time where the group will reflect on the activities they have been involved in that day. They will analyze the positive and negative occurrences and discuss how they can learn from these experiences. This activity allows each youth to express himself freely on any ideas he has to improve the functioning of the group.

Toward the end of the pow-wow, the counselor will lead the group into a discussion about the activities the group will engage in the following day. This reinforces the goal oriented philosophy of the Fair Play Wilderness Camp School and helps to motivate the youths for the following day.

2.3 Huddle-Up

A huddle-up is a meeting where the group discusses specific behavior and/or attitude problems. This meeting may be called by a counselor or youth at any time that the conduct of a youth does not meet the group's standards.

A huddle-up begins by the one who called the meeting informing the group what the huddle-up is about and who is involved. The group is then encouraged to express themselves and share their opinions about the problem at hand. The individual involved in the problem will be asked by the group if he understands the problem and if he does, to solve it by going through the four steps.

The four steps are:

1. Identify the problem - admit what was done and acknowledge that it was wrong.
2. Explanation - explain why the problem was a problem.
3. Alternatives - give several methods of handling this situation more appropriately.
4. Committment - choose the best alternative and set a realistic goal to achieve better behavior and attitude.

2.4 Cause & Effect Relationships

At Fair Play Wilderness Camp School, we stess the importance of personal responsibility for our behaviors and attitudes. We structure our time and activities in a manner that will allow us to deal with behavioral problems when necessary. Emphasis is placed on understanding the causes for behaviors and attitudes. This allows clients to gain an improved perception of themselves and their environment which, in turn, creates a learning experience.

Understanding the effects of behaviors and attitudes is equally important. This is an area that many of our clients are deficient in. They have short attention spans and are very impulsive in their reactions to people. This deficiency is improved as they frequently identify, analyze and generalize their personal experience in various activities whether it be work, play or accepting certain consequences.

We see the ability to determine cause and effect relationships as being imperative if a client is to be successful. It is because of this that so much attention is given to the clients perception of things and then efforts are made to help the client mature in his perception. We believe that perception forms attitudes and attitudes form motivation; therefore, the perception must be improved if behaviors and attitudes are to be changed.

2.5 Toleration of Negative Behavior

Based on subcomponent 2.4, we feel there are times when behavior is a mere symptom of a much deeper problem and consequently emphasis is placed on meeting the needs of the client rather than "dealing with behavior". We are very much concerned that our clients do learn self-discipline and appropriate behavior but we see those areas being developed much more effectively as we meet the total needs of the client. We feel that the willingness to work with severe behavioral problems is a strength of the overall program. Clients are expelled only when the staff feels that the behavior is such that it will cause other clients to regress considerably or the client is unable to benefit from our program.

2.6 Recognizing Authority and Following Instructions

The vast majority of the clients enrolled in our programs have difficulty relating to authority figures and taking directions from them. As we analyze the lives of these youths, it becomes quite apparent that in order for them to properly function in society, their perception of and attitudes toward authority figures needs to improve. The structure of our program is designed to let this problem area surface so it can be worked with. Many of our clients need positive reinforcement on a frequent basis to effectively change their attitudes toward adults.

We stress to our clients the importance of authority and the effectiveness of a chain of command. Emphasis is placed on helping the client understand that in real life situations, even as adults, there will be various forms of authority that they will be subject to. This enhances the comprehension of the client and enables them to do long-term planning more realistically.

2.7 Adult Role Model

The ability and skill to relate to others is most effectively transmitted when the deficient individual is either the beneficiary or observer in a real life situation. We see our counselors as actively fulfilling the role of modeling appropriate personal and social skills.

The counselor is the key to reaching the client and making the program work. He does all this while living with the clients 5 days each week. With the resonsibility of ensuring that the individual needs of each client are met and the goals and objectives of the overall program as well, there is a constant opportunity to become personally involved with the client in a caring and empathetic manner.

It is the counselors who form the backbone of our program. They are the individuals who form the relationships with the clients. We believe that relationships are best achieved through action and that love has to be implemented in concrete and specific ways in order to be effective.

Our clients can understand concern and helpfulness, but they strangle on words when they are not matched by action. It is on this basis that we seek counselors who have love in their hearts, in their hands and in their feet. Such people declare their faith in action more than in words and are consequently much more effective with a youth who has emotional disturbances.

2.8 Comprehensive Camper Plan - Goals

When a client is placed in our program, he is asked to write several general goals he hopes to achieve during his stay. We then take his goals and meet with the placing agency to formulate a comprehensive plan that will best enable us to meet the needs of the client.

After a client is placed, a conference is held every three months to review the original plan and to revise or add goals that will help the client achieve his potential. The placing agency and client are invited to attend this meeting.

Goals are also written by the client on a periodic basis. We feel it is imperative that he has certain specific areas that he is consciously trying to make improvement in, as this will provide incentive and motivation for him.

When a person is deficient in personal/social skills, the first step to meeting that need is to formulate relevant and acceptable goals that will address these specific areas. We believe that goals should provide a challenge to the client and be attainable. Goals that are set too high breed discouragement and frustration.

2.9 Group Therapy

The group plays a major role in helping a client achieve his goals. We try to maintain a group which has 4 or 5 members that have stablized and are in turn able to share their experiences with those that are having difficulty in their personal and social relationships. When this process is utilized on a constant basis with positive reinforcement coming from the counselors, it produces change.

As a client begins to realize that his peers had similar problems and they have effectively dealt with them, he begins to feel hope and aspiration for himself. The group continues to support and challenge the client through good times and bad to continue trying to achieve his goals. It is this kind of reinforcement and support that enables a despondent and depressed individual to keep trying.

We believe that clients with emotional disturbances can best be helped when they sense a "servant attitude" from those trying to help them. To us, a "servant attitude" involves helpfulness, empathy, humility and honesty. As a client senses these characteristics in his group, he will begin to share his feelings and hurts of the past as an alternative to acting them out with deviant behaviors.

3.0 Spiritual Development

At the Fair Play Wilderness Camp School, we believe that every human has three basic areas which need to be developed in order to function at his full potential. These needs are physical, emotional and spiritual.

In our program, we have provided activities and structure that will aid a client in his spiritual development. Development in this area is a choice of the will and not one of mere feeling or emotion, thus needing a sense of committment from the intellect and a willingness to utilize self-discipline in one's attempt to make right choices.

We realize that religious activities and programs are often seen as being the spiritual development; we see them only as being an aid. Religious activity in itself is often merely a social function appealing to the emotions and not even encompassing the will.

3.1 Chapel Services

Chapel services are held on campus every Sunday morning and three Sunday evenings per month. Clients are encouraged to participate in these meetings. Their participation may vary from leading a favorite song to sharing some hurt they have experienced in the past and explaining how they have worked through this difficulty.

The chaplain always seeks to establish an atmosphere where the clients can feel free to share from their heart. Spiritual development occurs as a client hears what is being said and then realizes a principle of truth is being taught. As he realizes this and makes a conscious committment to utilize this principle in everyday situations, he is making progress in the area of spiritual development.

3.2 Vespers

Each group formulates their own vesper meeting on Wednesday evenings. This meeting allows for much creativity, but always centers on teaching

At times, a group will invite an individual from the community to talk on a specific subject. Subjects may vary from moral and ethical issues to relating personal experiences such as a missionary in a foreign land.

Groups also do skits to role play a story or have the counselor tell a story. Group singing is also a frequent activity in Vespers.

3.3 Bible Studies

We offer a Bible Study course to our clients. Many of them have chosen to enroll and have benefited greatly from these studies. This course is divided into eight subject areas including marriage, maturity and sharing what you believe.

This course has certainly enhanced the spiritual perception of the boys and has also reinforced the philosophy of our program in the area of personal and social skills.

3.4 Group and Individual Counseling

Reinforcement of spiritual values and principles by the group and most of all, the counselors is imperative in the development of our clients. As issues, attitudes and ideas are discussed, we feel it is important that a firm and loving approach is exemplified on a consistent basis. When this approach is utilized consistently, there is a gradual transmittance of values into the life of the client.

3.5 Special Events

Occasionally, we reinforce the values we teach by utilizing resources from the community. We invite singing groups to campus to share their ministry with the clients.

Another aid we utilize is films about great men of the past who have lived productive lives. These films reinforce our values in areas of self-discipline, love for mankind and faith in God. Films aid as a good motivational factor because they encompass a life span in condensed form.

Guest speakers are invited frequently to share on specific subject areas with the boys. We feel this is a very productive method of reinforcement. Outside influence often times is very appealing and clients respond and yet the values being taught are the same we uphold.

3.6 Adult Role Model

Strong leadership is essential in the area of spiritual development. Teaching by exmaple in the way we live and talk is the most effective way of transmitting the values we embrace.

We believe that Jesus was the perfect role modal in meeting the needs of people. The adults at Fair Play Wilderness Camp School endeavor to exemplify and uphold the principle He stood for and taught. When teaching and role modeling in an attitude of helpfulness and humility, clients perceive sincerity. This is what young people want; something genuine, authentic and sincere or as our clients say, "something that is for real". This does not mean that we are "permissive"; it implies that because of love and concern for our clients, limitations are set in order to blend maturity, responsibility and discipline in them.

This method is by no means an "easy" way of teaching, but we embrace it because it is the most effective.

Our counselors serve in their capacity for one reason and that is to help the client. Pay is minimal and hours are long and so there are really few tangible benefits other than the fulfillment of knowing that someone is being helped. This the kind of committment that has established the program and the kind that will keep it operating successfully.

4.0 Education

At the Fair Play Wilderness Camp School, we believe that education involves a learner and a teacher and that the teacher can be a person or situation or both. We do not believe that learning is confined to a classroom but that it should and can be an integral part of every day life. Two ingredients which we believe to be very important in the educative process are interest and curiosity which form motivation. We feel that a wilderness environment is ideal for the development of these two ingredients.

While enrolled at the Fair Play Wilderness Camp School, students are involved in an experienced based curriculum which is an integral part of the on-going therapy process. Activities are planned to motivate students toward attaining their goals. Education is provided by the following experiences.

4.1 Campsite Education

Academic benefits are developed and strengthened through encounters with this experienced based curriculum. Composition skills are acquired as clients write plans, menus and letters. Oral language skills evolve from the same sources as they talk about their projects they have completed. Mathematic skills develop as the children calculate the cost of a meal, construct a tent or keep track of their bank accounts. Skills in reading emerge as they complete research in their need to know more about something they have observed or as they seek background information on their study topic that will be useful on a trip. By taking advantage of past experiences, existing or developing interests, applying values to knowledge learned and learning by doing, these experiences are integrated to reflect real life situations.

4.2 Classroom Education

As a boy begins to show progress by assuming and carrying out responsibility in his group, he becomes eligible to begin classes in the traditional classroom setting. Each client is tested to assure that he is placed appropriately at his level of functioning.

An individualized educational plan is developed on each client at time of entry into the program. These objectives are reviewed on a quarterly basis to assure that the individuals needs are being met. A progress report is forwarded to the placing agency after each quarterly meeting to ensure that they stay informed about their client and his needs.

Four units of credit may be earned towards a diploma by high school students. They may earn one credit in each of these subject areas: English, Math, Physical Education and Community Living.

Clients not enrolled in high school are offered all required courses for junior high students.

4.3 Field Trips

Occasional field trips are taken to enhance and strengthen the skills being taught in the classroom. Periodically, the students in the classroom will be taken to a public library. This gives them an opportunity to develop skills in doing research.

Clemson University has many programs which are both appealing and educational to our clients. Field trips are taken to these programs when related subject areas are taught in the classroom.

Groups also visit public service places; fire stations, police stations and radio stations. These activities enhance their perception of government functions and public communications networks.

4.4 Community Resources

Educational films are occasionally shown as an aid to teaching certain subject areas.

Community people involved in forestry, first aid, aerodynamics and wildlife preservation have occasionally come to the camp and talked to the clients about their specific field of work or interest.

4.5 Canoeing and Hiking Trips

Canoeing and hiking are the two activities clients engage in to earn credit for their physical education course. These are planned trips away from camp in which a group is totally dependent on their own resources for meeting their individual/collective needs. Special attention is directed to the development of the following skills: research, writing, math (proportions, estimates and percents), gross motor planning and map reading.

4.6 Adult Role Model

In accordance with the philosophy of the overall program, we believe that the key link to success in the educative process is the adult or teacher who transmits the material to the client.

It is imperative that the adult is alert and aware of the individual needs of each client. Creativity is also an essential ingredient in making the learning process an enjoyable and productive experience.

5.0 Family Counseling and After Care

The personnel of the Fair Play Wilderness Camp School believes that every child should have the privilege of living in a family environment that provides structure, security and meets the emotional needs of the child. Most of our clients have not experienced this in their families. We believe that a family, along with their boy, needs to make positive changes in order to develop an atmosphere of order and security. This is needed if our clients are to retain the skills they have attained. Because of this prevailing need, we have established our program to also work with families of the clients we serve.

5.1 Individual Family Counseling

Families who are having difficulty in their home often ask for assistance in establishing an environment that is conducive to the development of positive attitudes and behaviors. Our family worker will invite them to the camp for a conference to discuss in detail the areas that can be improved in their home and assist them as they make improvements. Some families require only minimal assistance while others may need continued counseling over a period of time. This counseling is not compulsory but is available for any family that wants assistance.

5.2 Resources

We encourage families who participate in counseling to attend the Institute in Basic Youth Conflicts Seminar. This seminar is presented at numerous locations in the United States on an annual basis. It addresses principles that are essential in the development of the lives of young people.

This seminar is designed to assist in the following areas: overcoming feelings of inferiority, resolving anger, worry and bitterness, discovering purpose in life, developing genuine friendships, resolving moral conflicts, etc. Clear steps of action are given at this seminar to provide lasting solutions rather than temporary relief.

5.3 Family Seminars

Our family worker will on an occasional basis get families together from a specific geographical location and conduct a mini-seminar with them.

These sessions are designed to help the parent understand causes and effects of child rebellion, the importance of open communication, appropriate husband-wife relationships and how to restore broken parent-child relationships.

5.4 Homesdays

Homesdays are periods of time where a client is permitted to visit with his family. These visits aid as an evaluation of the client and family and assist the camp and placing agency to assess the home environment and the strength of the client. We feel these visits often help problem areas to surface and in this way are an integral part of the therapeutic process.

5.5 Follow-Up

After a client leaves the camp program, our family worker begins an active follow-up to ensure a smooth transition back into the home. He also assists with any problems during this transition. The family worker makes occasional visits after the boy has adjusted and seems to be doing well. Contact by visitation may continue for a period of two years, if needed.

The family worker makes frequent contact by phone to clients who have graduated the program. This is done as a gesture of support to the boy as he encounters difficulties in making the transition.

5.6 Family Sharing Sheet

When a client graduates the program, his family is asked to report on the boy's performance by completing an evaluation form sent by the family worker on a monthly basis. This helps the family become aware of the presenting needs as they complete the evaluation and provide the family worker with information that is valuable in his functions.

Seventh Annual Acres National Rural
Special Education Conference

Conference Presentation
March 18, 1987

TITLE: Vermont Parent/Professional Partnership Workgroup: Families and Schools Do It Better Together

PRESENTERS: Susan Abdo and Elizabeth Milizia

The idea is a simple one: Children do better in school when parents and educators work together. However, putting this seemingly simple concept into practice entails a new way of thinking about the relationship between families and schools. The belief that cooperative parent/professional partnerships are required to ensure successful implementation of education services for all children is receiving statewide endorsement through the Vermont Parent/Professional Partnership Workgroup. Vermont is a rural state which geographically isolates many families and professionals. The Green Mountains present a physical barrier which splits Vermont from north to south. Therefore, it is virtually impossible to travel from east to west, without traveling a long distance around the mountains. Many families live in areas where resources and services are not locally available. Also, it is often difficult for service providers to locate and assist individuals who may need their services. Thus, many individuals, both parents and professionals, are isolated from their peers and therefore lack personal and professional support. Because of this isolation, similar problems are experienced but solutions are not shared. When people and services are linked, time and energy are saved by sharing information and solutions. This concept brought about the formation of the Vermont Parent/Professional Partnership Workgroup.

A conference, sponsored by the Northeast Regional Resource Center in 1984, focused on parents and professionals working together. Several individuals from Vermont attending this conference received the support and information necessary to implement this concept at the state level. Currently the membership reflects representation from parents, teachers, administrators, and advocates.

The Vermont Parent/Professional Partnership Workgroup (VPPPW) Master Plan shows how its goals, objectives, and training activities relate to the Vermont Special Education Long-Range Plan. The linkages in use for carrying out the Master Plan are also identified. The Master Plan helps the Workgroup to focus on its goals and objectives and organize training activities. It is a working document and thus facilitates the Workgroup's future planning efforts.

VERMONT PARENT/PROFESSIONAL PARTNERSHIP WORKGROUP
MASTER PLAN

The first section is organized by overarching goals, identified by the Workgroup when it first began meeting. Components under each goal include:

- Workgroup Objectives identified by members present at a May 1986 conference in Cromwell, Connecticut on Schools and Families.
- Activities from the Special Education Unit Training Plan developed in collaboration with Workgroup members.
- Reference to the Special Education Unit Long-Range Plan.
- Linkages with other groups or organizations involved in related activities.

VPPPW Goals

1) To encourage increased State Department of Education support for parent/professional partnerships;
2) To identify activities and programs which model positive parent/professional partnerships;
3) To publicize and support activities and programs which model cooperative parent/professional partnerships;
4) To model parent/professional partnerships in all efforts undertaken by the Vermont Workgroup;
5) To encourage Vermont's higher education system to implement positive parent/professional partnerships in all areas of their activities;
6) To communicate and coordinate Workgroup activities with the Northeast Regional Resource Center.

VPPPW Objectives

1) To develop and implement outreach activities in order to communicate with "hard to reach" parents and professionals.
2) To disseminate information on parent/professional activities through newsletters, handbooks, and directories.
3) To develop and implement joint training opportunities, the topics to be identified by parents and professionals.

4) To identify, support, and promote services available to parents and families at the regional level.

5) To assist parent/professional partnership activities at the State Special Education Unit level.

6) To develop Parent/Professional Partnership groups at the local level.

Under the first goal, "To encourage increased State Department of Education support for parent/professional partnerships," components include:

VPPPW Objectives

- #5 - To assist parent/professional partnership activities at the State Special Education Unit level.

VPPPW Training Plan Activities

- The chairperson of the Workgroup's Training Subcommittee is the Professional Development Coordinator for the Special Education Unit.
- The October 6th Negotiation Skills Workshop was partially funded by the State Department, Special Education Unit.

Special Education Long-Range Plan References

- All items, 1-7, under Topic C (Parent Involvement) commit State Department resources to support parent/professional partnerships. Those seven items are:

  1) The Unit Chief, by September 1, 1987, in collaboration with parent groups, will prepare and disseminate to all districts and parent groups new and informative parent material that will address the information needs of parents.

  2) The Director, by December 1, 1986, will train Unit staff in improving the relationship between the Department of Education and parents with disabled students.

  3) The Unit Consultant in Emotional Disturbance, during the 1986-1987 school year, will collaborate with the Department of Mental Health Child and Adolescent Service System Program (CASSP) to encourage the development of a group of parents and significant others having a priority stake in the education of children who are emotionally disturbed.

4) The Unit Professional Development Coordinator, in conjunction with the VPPPW during the 1986-1987 school year, will conduct a series of 10 training activities which address the training needs of Vermont's special education parents' groups.

5) The Unit Chief, by December 1, 1986, will identify and share information about those school districts which have effective relationships with local parent groups.

6) The Unit Professional Development Coordinator, by January 15, 1987, will provide information and training to district special education administrators and parents on strategies and promising practices in improving the linkage between the schools and parents.

7) The Unit Chief, in collaboration with the Parent/Professional Partnership Workgroup, by October 31, 1987, will complete an evaluation of the impact on parent/professional partnerships by the Long-Range Plan activities.

Linkages

- Two staff members from the Special Education Unit currently attend regular Workgroup meetings.

The second goal is: "To identify activities and programs which model positive parent/professional partnerships."

VPPPW Objectives

- #2 - To disseminate information on parent/professional collaborative activities through newsletters, handbooks, and directories.

- #4 - To identify, support, and promote those services available to parents and families at the regional level.

VPPPW Training Plan Activities

- One of the first activities is to identify parent training activities and needs. As more activities are undertaken more information should emerge.

Special Education Long-Range Plan References

- 4) - The Unit Professional Development Coordinator, in conjunction with the VPPPW during the 1986-1987 school year, will conduct a series of 10 training activities which address the training needs of Vermont's special education parents' groups.

- 5) - The Unit Chief, by December 1, 1986, will identify and share information about those school districts which have effective relationships with local parent groups.

Linkages

- Vermont Association for Special Education Administration (VASEA)
- Vermont Interdisciplinary Team (I-Team)
- Vermont Information and Training Network (VITN) associated with Vermont Association for Retarded Citizens (VARC)
- Special Education Unit
- Vermont Surrogate Parent Program (VSPP)
- Headstart
- Rural Education Center

The third goal is: "To publicize and support activities and programs which model cooperative parent/professional partnerships."

VPPPW Objectives

- #1 - To develop and implement outreach activities in order to communicate with "hard-to-reach" parents and professionals.

- #2 - To disseminate information on parent/professional collaborative activities through newsletters, handbooks, and directories.

- #3 - To develop and implement joint training opportunities topics to be identified by both parents and professionals.

- #6 - To develop parent/professional partnership groups at the local level.

VPPPW Training Plan Activities

- The October 6th Negotiation Skills Workshop was organized by parents and professionals.
- In subsequent activities, the above referenced Workgroup objectives would direct training efforts.

Special Education Long-Range Plan References

- 1) - The Unit Chief, by September 1, 1987, in collaboration with parent groups, will prepare and disseminate to all districts and parent groups new and informative parent material that will address the information needs of parents.
- 3) - The Unit Consultant in Emotional Disturbance, during the 1986-1987 school year, will collaborate with the Department of Mental Health (CASSP) to encourage the development of a group of parents and significant others having a priority stake in the education of children who are emotionally disturbed.
- 5) - The Unit Chief, by December 1, 1986, will identify and share information about those school districts which have effective relationships with local parent groups.
- 6) - The Unit Professional Development Coordinator, by January 15, 1987, will provide information and training to district special education administrators and parents on strategies and promising practices in improving the linkage between the schools and parents.

Linkages

- VASEA
- I-Team
- Special Education Unit
- VITN

The fourth goal is: "To model parent/professional partnerships in all efforts undertaken by the Vermont Workgroup."

VPPPW Objectives

- All objectives reflect this goal.

VPPPW Training Plan Activities

- The Master Plan was designed and is being implemented by both parents and professionals.
- Newsletter articles and presentations are co-authored and co-conducted by parents and professionals.
- Training activities are planned through the VPPPW.

Special Education Long-Range Plan References

- The introduction to the Long-Range Plan includes this statement: "To complete these enterprising activities, we will need the cooperation and support of the special education community, including both parents and professionals."
- Topic C (Parent Involvement) addresses this collaboration with the Workgroup through activities.
- The Chief of the Special Education Unit is requesting collaborative input from parents and professionals in several other Long-Range Plan activities.

Linkages

Parent and professional linkages reflected by the Workgroup's memberships include:

- Special Education Unit
- VASEA
- I-Team
- PASSPORT (Local Parent Advocacy Group)
- Orton Society
- Northeast Regional Resource Center (NERRC)
- Parent-to-Parent Program (Local Parent Organization)
- VARC
- Vermont Coalition of the Handicapped (VCH)
- Special Education Advisory Council
- Vermont Surrogate Parent Program (VSPP)

- Vermont Epilepsy Association (VEA)
- Vermont Chapter of the Council for Exceptional Children (CEC)
- Vermont National Education Association (VNEA)
- Vermont Developmental Disabilities Council

The fifth goal is: "To encourage Vermont's higher education system to implement positive parent/professional partnerships in all areas of their activities."

VPPPW Objectives

- None directly address this goal.

VPPPW Training Plan Activities

- None directly address this goal.

Special Education Long-Range Plan References Under Topic D (Training and Staff Development)

- 2) - The Unit Chief, by October 1, 1986, will determine the appropriateness, adequacy, and targeted focus of pre-service training for speech and language pathologists in light of the demands of current positions. This information will be shared with Vermont colleges and the University of Vermont by December 1, 1986, and will be used to bring about change in state-supported training programs.
- 3) - The Unit Professional Development Coordinator, during the 1986-1987 school year, will continue to meet with the education faculty of higher education training institutions in the state to share information about training activities and other Vermont special education issues.
- 5) - The Unit Professional Development Coordinator, in conjunction with the Training Council, by June 30, 1987, will work with representatives of Vermont's colleges and universities and local school districts to identify minimum competencies in the area of student assessment.
- 9) - The Unit Professional Development Coordinator, by October 1, 1987, will improve the coordination of special education in-service training activities offered by the Unit and by colleges and universities.

Linkages

At the point, linkages appear to be the strongest strategy to achieve this goal. Linkages with higher education occur through:

- VASEA
- VARC
- VITN
- Special Education Unit
- VCH
- CEC
- Higher Education Representative on the Workgroup.

The sixth goal is: "To communicate and coordinate Workgroup activities with the Northeast Regional Resource Center."

VPPPW Objectives

- The objectives were developed at a NERRC sponsored conference, and #4 indirectly support this goal.

VPPPW Training Plan Activities

- The October 6th Conference was co-sponsored by NERRC. Future support of this nature is anticipated.
- Five Regional Workshops for parents and professionals which focus on negotiation skills are being planned for Spring of 1987 and will be partially supported by NERRC.

Special Education Long-Range Plan References

- None directly address this goal.

Linkages

- Workgroup co-chairs are Vermont's representatives to NERRC's Regional Workgroup for Parent/Professional Partnerships which meets approximately twice a year.
- NERRC Staff participates in Workgroup meetings and activities.

What are the "softspots" or problem areas the VPPPW has faced? A discussion of "softspots" may benefit others who are trying to organize and support a parent/professional partnership organization at the state level:

- Getting the Workgroup started requires strong commitment of a few individuals.
- The life of the organization is dependent on the resources individual members bring to the Workgroup. The linkages of those members is the mechanism for dissemination of information.
- VPPPW members volunteer their time and effort to support the organization. Fluctuating the Workgroup's meeting day and time promotes involvement of individuals who otherwise would not be able to participate. Strong, dedicated, grassroots membership is an important factor in the successful functioning of the Workgroup. The Workgroup is not connected to another organization and therefore is able to function independently of other organizations.
- Adequate geographic representation is a problem. The Workgroup is scheduling meetings in different areas of the state.
- The VPPPW relies on fiscal support from the Northeast Regional Resource Center and the Special Education Unit of the Vermont Department of Education to carry out training activities. Financial and moral support from other state and federal agencies increases the effectiveness of the Workgroup.

In the future, the Workgroup will focus on promoting a good relationship between parents and schools. As the Workgroup grows, local needs will become more evident and state and local talent to address those needs will be identified. The Workgroup will continue to raise a sense of consciousness for the need of spending time to nurture the value of parent/professional relationships throughout the state. Eventually, the Workgroup anticipates that local groups of parents and professionals working cooperatively will be established.

Linda J. Reetz
Department of Special Education
University of South Dakota
Vermillion, SD 57069

What Is My Job? Increasing Retention of Rural Special Educators Through Role Clarification

Retention of rural special educators may be increased through clarfication of their roles which will decrease the amount of stress they face on the job. This session will explore this issue by referring to research to support this position and pointing out means that will result in greater clarification of the roles of rural special educators. This session will address the following areas: personnel retention, administration, and defining regular and special education roles. It will, therefore, be of interest to both administrators and special education teachers working in rural areas.

The information presented in the lecture will reflect applications of the findings of a research study involving 307 special education teachers in North Dakota and South Dakota. They completed two survey instruments: the Maslach Burnout Inventory and the Role Questionnaire, and a demographic data sheet. The study was designed to investigate the extent of stress induced burnout among rural special educators. Three factors of burnout were considered: emotional exhaustion, depersonalization, and a reduced sense of personal accomplishment. The scores in each of these areas were compared to a variety of employment data such as: years of teaching, the number of schools served, exceptionalities taught, type of service delivery, caseload, and grade span. The scores were also compared to personal factors such as age, sex, and marital statur. In addition these three factors of burnout were compared to the scores on the Role Questionnaire which measured role ambiguity and role conflict in their employment.

Some of the personal and employment factors yielded positive significant correlations with high levels of stress induced burnout. The greatest factors of significance in predicting burnout, however, were those of role ambiguity and role conflict. A regression formula was used. When controlling for the variance of all of the personal and employment factors role conflict scores accounted for significant changes ($p < .01$) in the frequency and intensity of burnout as measured by depersonalization and emotional exhaustion. Higher amounts of role ambiguity accounted for significatly less high feelings of personal accomplishment ($p < .01$).

These findings have generated recommendations for rural special education programs regarding the following:

1. Improvements of faculty communication channels
2. Necessity for administrators to provide additional reinforcement and recognition for some special educators
3. In-service training in stress reduction
4. In-service training for administrators to develop specific role responsibilities for those who have shared responsibility for delivery of services
5. Development of clear teacher job descriptions
6. Involvement of teachers in developing realistic special education school goals
7. Development of "mentoring" systems among special educators across schools.

A packet of information with means to operationalize each of these recommendations will be discussed and shared with the participants. It will contain goals sheets, steps necessary to facilitate implementation of these activities and sources of information to assist in the process.

THE HOME ACTIVITY PROGRAM FOR PARENTS AND YOUNGSTERS: AN INNOVATIVE HOME-BASED SERVICE DELIVERY MODEL FOR RURAL YOUNG CHILDREN WITH HANDICAPS AND THEIR FAMILIES

Cybil Perkins
Nevada Department of Human Resources

Abstract: The Home Activity Program for Parents and Youngsters (HAPPY) addresses the needs of under-served young children with handicaps and their families who live in isolated rural areas of Nevada. This paper describes this model program and its two interrelated components: computer-assisted home-based curricula and video-assisted home-based assessment and instruction. The evaluation methodology and results of preliminary child-progress data is also described.

Introduction

In recent years there has been increasing research which supports the positive impact early intervention for children with special needs has on helping these children acquire functional skills (Moore, Fredricks & Baldwin, 1981; Strain, 1981;), helping their families cope with the stress and demands of additional care and nurturance (Vadasy, et. al., 1982), and reducing the cost of later education (Utah State University, 1982). In addition, research has shown that the earlier an infant and his/her family receive services to either prevent or remediate a handicapping condition, the greater and longer-lasting the benefits (Smith, 1982). Clearly, the provision of early intervention services for children with handicaps and their families is both socially and fiscally responsible. The problem addressed in this paper concerns the effective and efficient provision of comprehensive early intervention services in isolated rural areas located far from early special educators, therapists, and other support personnel.

The HAPPY Model

The Home Activity Program for Parents and Youngsters (HAPPY) is a second-year Handicapped Children's Early Education Program (HCEEP) demonstration project which has developed a service delivery model to meet the needs of young children with handicaps, ages birth through six, and their families, residing in rural Nevada who otherwise lack access to regular early intervention services. In these isolated, rural areas where daily home- or center-based services would be too costly and impractical, HAPPY promotes the families as the teachers and the home as the learning environment. Program staff serve as consultants to the families to help identify developmental deficits, and provide recommendations about how best to remediate the deficits. With the use of a computer-assisted assessment-based curriculum in combination with video technology, HAPPY provides the following services:

1) Monthly home visits and quarterly assessments by the Child Development Specialist. Home visits and assessments are videotaped for review of child progress by Reno-based therapists and specialists.
2) Initial in-home evaluations by, and regular video and telephone consultation with, Speech and Physical/Occupational therapists.
3) Recommendation of individualized educational and therapeutic activities to be done daily by the parents with their child in the home. Activities are provided to the family via individualized instructional videotapes and printed computer-assisted "Home Activity Packages," and are updated monthly based on actual child progress.
4) Training and support to the parents/families, including assisting in their involvement in peer support groups.
5) Identification of, coordination with, and training of local paraprofessionals and professionals to foster local services for children and their families.
6) Coordination of transition to other services.

Computer technology facilitates the generation of individualized monthly home activities for each child, based on their current functional level. Written monthly home activity packages are developed with the use of the Seattle Early Learning Inventory (SEIL), a computerized assessment-based home curriculum which has recently been developed by Dr. Rebecca Fewell and her staff at the University of Washington. The SEIL contains approximately 780 home activities that can easily be incorporated into one or more common daily routines (ie. mealtime, bathtime, playing with others). The SEIL utilizes assessment data from the criterion-referenced Early Intervention Developmental Profile to suggest a variety of activities for each developmental deficit. The Child Development Specialist selects from these developmentally-appropriate activities based on her knowledge of the family, child, and home environment. Seven to fifteen activities are chosen each month for each child based on his/her most recent quarterly assessment. After the activities are selected, the computer program organizes them into daily routines and individualizes each activity by placing the child's name and proper gender pronouns throughout the text. In addition of the activities contained in SEIL, original activities are regularly written by the program therapists and incorporated into the home activity package in order to address the unique needs of the children and/or family.

In addition to computer technology, HAPPY utilizes video to both enhance the presentation of the recommended home activities, and to reduce costly travel to remote rural areas. Individualized instructional videotapes are made monthly for each family in order to demonstrate the educational and therapeutic activities recommended in the written home activity package. These videotapes are mailed, along with the home activity package, to the families for their use in their home. (HAPPY has video players to loan to families who do not have access to one.) Families can then refer to the videotaped demonstration and written description of the activities throughout the month, and review them as often as needed. In addition to the individualized videotapes, HAPPY will also loan commercially produced instructional videotapes to the families when applicable.

Video technology is also employed by HAPPY to reduce the need for extensive (up to 9 hours of driving one way) and, therefore, costly travel to each home by more than one staff member. All monthly home visits and assessments are videotaped. Child progress and parent/family implementation of home activities can then be visually reviewed by the Reno-based interdisciplinary team. Videotapes of previous home visits have also been useful tools for obtaining medical opinions of otherwise inaccessible professionals, for assessment of progress, and for positively reinforcing parents' efforts by dramatically illustrating child progress when progress seems agonizingly slow.

Preliminary Data Evaluation

Preliminary data was analyzed for the five children, ages 12 to 45 months at pre-test, who have participated in the program the longest. Two of the children had participated for six months, and the remaining children for nine months. Upon entry to the program, one child showed developmental delays in four domains, one child was delayed in five domains, and three children were delayed in all six developmental domains.

Child progress data was collected by quarterly staff administration of the Early Intervention Developmental Profile (Schafer & Moersch, 1981), a criterion-referenced developmental scale which charts performance across six domains: perceptual/fine motor, cognition, language, social/emotional, self-care, and gross motor. Data was converted and analyzed as developmental age equivalents (DA's), which was analyzed in two ways.

The first method calculated and compared pre-test and post-test developmental quotients (DQ's), which are the ratio of developmental age to chronological age (DA/CA), multiplied by 100. Developmental quotient was used because it adjusts for changes that could be attributed to maturation. Average pre-test and post-test DQ's are reported in Table 1.

The second evaluation method utilized a prediction measure which shows how development during an intervention program compares to what could be expected to happen if development remained stable at the rate indicated at program entry. This method, called the Proportional Change Index (PCI), (Wolery, 1983) and the Intervention Efficiency Index (Bagnato and Neisworth, 1980), uses developmental rates for each domain at entry to predict post-test scores and compares predicted to actual post-test performance. An index of 1.0 indicates that the rate of development during intervention is the same as that prior to intervention, and an index above 1.0 indicates an accelerated rate of development since intervention.

Preliminary data analysis of the five children shows higher scores at post-testing when compared to pre-testing. Results indicate a gain in the average DQ for the five children across all developmental domains. In addition, as expressed by the average Proportional Change Index across all domains, an accelerated developmental rate is indicated with program participation.

Conclusion

Preliminary data suggests that the HAPPY model is an effective intervention program for children with handicaps who lack access to such programs near their homes. The service delivery model of the Home Activity Program for Parents and Youngsters, including the use of video and computer technology, appears to be effective in meeting the unique needs of young handicapped children and their families who reside in isolated rural areas of Nevada. The families who have been provided support services from HAPPY to enable them to address the individual therapeutic and educational needs of their children have produced a positive change in their children's development.

TABLE 1

Domains	Aver. Pre-test DQ	Aver. Post-test DQ	Aver. PCI
Perceptual/Fine Motor	60	64	2.13
Cognition	50	66	3.05
Language	43	53	1.80
Social/Emotional	86	100	1.71
Self-Care	54	66	2.16
Gross Motor	41	50	3.19

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Pamela S. Pease
Director of Research/Evaluation
and
Lillian Kitchen
Director of Special Projects

TI-IN Network, Inc.
100 East Nasa Road 1
Webster, Texas 77598

MEETING THE NEEDS OF RURAL SPECIAL EDUCATION IN THE INFORMATION AGE: USING TI-IN NETWORK'S INTERACTIVE SATELLITE BASED EDUCATIONAL NETWORK

Abstract

The following paper details the development and implementation of new technological devices for handicapped students and of a Math Magnet program for gifted students via TI-IN Network, Inc.. The Network, is the first private, interactive satellite based educational system in the country developed for public schools. TI-IN Network offers a total systems approach by providing both the user technology and a wide range of course offerings. An overview of the specific technology employed and the course offerings are detailed. The cooperative partnership between rural public educational institutions and private enterprise is explicated.

The Rural Context

We are all responsible for perpetuating a generalized myth about rural america. For decades, rural areas of the United States have been perceived, usually by urbanites, as victims of cultural isolation and economic deprivation. Others equate the perceived rural isolation with freedom, from a more complex urban lifestyle.

Life in rural regions is idealized as simple, environmentally pure and conservative. These beliefs are responsible in part for creating an inferior image of educational institutions who happen to be located in rural districts. They are frequently depicted as unsophisticated and slow to change. The reality is, rural schools strive for academic excellence.

They are guided by legislative curriculum mandates that require adherence irrespective of size (small/large), geographic location (urban/rural) and regional economic resources. Likewise, rural programs are required to meet special education needs, i.e., physically handicapped, gifted and talented, of their student population.

New technological innovation has been most prevalent in the rural context. However, people continue to believe that rural residents/students are less amenable to change and generally lack the necessary resources for implementing an innovation. These beliefs are not validated when rural schools adopt the TI-IN Network.

Rural TI-IN Sites : Adoption Grows

The growth of the TI-IN Network, Inc., an interactive, satellite based educational system, illustrates that school administrators in rural public school districts are the vanguard of its nationwide adoption. Over half of the 205 receive sites report district sizes by average daily attendance (ADA) to be 1,000 or less. School administrators, who adopt TI-IN, have a high interest in the broad range of course offerings to expand their current curriculum. With the cost of the network being less than hiring one teacher, the service is affordable to even the smallest districts.

The TI-IN Network is a technological alternative to face-to-face classroom instruction. All instruction is live and interactive, using one-way satellite transmitted video with two-way audio talkback. After a year and a half of operation, TI-IN Network is made up of 205 receiving sites (with 215 actual end users/subscribers) across 14 states and has a student enrollment of over 1450. Curriculum offerings include, 400 hours of in-service training for teachers/staff, 19 high school academic courses for students, student enrichment programming and tutorials. The courses are broadcast over two-channels, 6 days a week. For rural schools, TI-IN courses offer a creative solution to problems of teacher shortages and new legislative curriculum mandates.

New Technology in the Context of Rural

Over the past two decades, rural america has been the testing ground for a wide array of new telecommunications technologies. The government funded research and demonstration projects, that flourished in the early and mid-1970's, used telecommunications media to expand educational opportunities in geographically remote areas 1.

The change agents who developed the demonstration projects believed that rural residents and institutions, with inherent geographic barriers, needed easier access to information/resources. Elton and Carey (1980) suggest that many assumptions of perceived user needs for technological applications are outweighed by the actual financial costs. For several of the demonstration projects the strong user demand never emerged. Many of the technological choices were too costly after the government funding ended. The high cost of the application was cited as the principal reason for ultimate non-adoption.

While, using video telecommunications media for education in rural areas is not new, the pre-conditions to make it affordable and successful are. Recent state legislative curricula mandates; the decreasing cost of satellite hardware and transmission time; and a cooperative venture between public sector institutions and private enterprise are factors which converge making satellite based education services feasible.

TI-IN Network Responds to Rural Special Education Needs

The TI-IN Network was conceived to equalize academic resources available to high school students and teachers. The TI-IN Network's roots are in Texas. At the time of its inception, Texas, not unlike other states, increased the curriculum requirements for high schools through legislative mandates.

A general teacher shortage, especially acute in specific subject areas (ie., foreign languages, computer math), coupled with increased budgetary demands of local districts, made compliance nearly impossible. For mathematics courses, a 1981 survey of 45 states indicates that shortages of math teachers is

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1 Examples of the variety of educational applications include: training vocational rehabilitation counselors via audio teleconferencing (Pease, 1983); continuing medical education for health providers via terrestrial based microwave video with audio talk back (Niemiac, 1983); continuing education for extension agents using audio teleconferencing and other narrow band video applications (ie., slow scan, electro-writers) for enhancement (Parker, 1979); multiple uses of cable television with a telephone dial-in for student homework tutorials and course offerings (Pease, 1982; Boyle, 1982).

acute in 43 states.2 Overall, the National Center for Educational Statistics estimates that over 200,000 new teachers will be required by 1991.3 TI-IN provides a solution to the plight of high schools by offering the courses which are both mandated and highly specialized for the gifted and talented student.

TI-IN evaluates both the user needs and their geographic locations to match their needs with the attributes of the satellite receive technology. Using Ku-Band satellite transmission permits any school located in the continental United States to receive these resources. As a private company, TI-IN is able to engineer, maintain and market the state-of-the art technology. The services are affordable, the initial subscriber costs, including approximately $8,400 in one-time equipment cost, are less than hiring one teacher.

Private Enterprise and Public Education Merge

The successful development of TI-IN stems from the cooperative venture between private enterprise and public education agencies. The partnership began between TI-IN and the Texas Region 20 Educational Service Center located in San Antonio. Region 20 is the critical link for the Network by providing the broadcast (up-link) facility for program origination. The Region 20 staff select the best qualified, certified high school teachers and submit the lesson plans for each course to the state education agency. By approving the lesson plans, state or local education agencies award academic credit for the courses taught via TI-IN.

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2 The National Commission on Excellence in Education, A Nation at Risk, April 1983, p.18.

3 Bowen, Ezra "And Now, A Teacher Shortage," Time, July 22, 1985, p.63.

Table 1. High School Courses 1985-86:

Channel A	Channel B
Honors Calculus	U.S. Government
Latin I	Spanish I
Computer Science	Computer Math
Personal Business	French I
Business Law	Trigonometry
Psychology	German I
Sociology	Elem. Analysis
	Pre-Calculus

Region 20 provides the necessary staff to manage the operation of its multiple studio facility. A curriculum expert works with each instructor to maximize their use of the multimedia features available on the TI-IN system. All of the TI-IN teachers report a low use of media in their previous face-to-face classroom instruction. The results of a end of the year survey suggests that TI-IN teachers report their teaching style has changed to incorporate multiple media (ie., slides, videotapes, pictures, graphics). Instructors are taught skills in how to maximize the two-way audio interaction with students.

Special education projects are funded. By combining the curriculum expertise of the Region 20 staff and the technical expertise of TI-IN, two grants were funded from the U.S. Department of Education. One grant, the development of a Mathematics Magnet School of the Air, is targeted to gifted and talented students. A second grant from discretionary funds has resulted in the research and development of new technological devices to assist physically and learning handicapped students to utilize TI-IN's satellite curriculum.

Serving other time zones and sharing resources. TI-IN continues to cultivate relationships with other public education agencies interested in providing broadcast facilities. For the school year 1987-88, TI-IN will offer courses originating from a California State University at Chico. Chico will act as a TI-IN affiliate offering graduate level teacher education on a third TI-IN channel. This broadcast site will add to the present resources available to subscribers.

State education departments across the country are evaluating TI-IN's total educational approach. They are considering its economic advantages for potential national resource sharing.

A "Total Systems" Approach to Implementation

TI-IN differs from other applications of satellite based technology, it brings the entire programming and hardware package to the user. TI-IN leases the satellite transmission time, registers students, coordinates and contracts with nationally know inservice trainers and works alongside Region 20 on program development. Dissemination of information about the TI-IN Network to potential subscribers is an on-going activity.

The user equipment is engineered by TI-IN specifically for the primary user population (students). They install, maintain and monitor the nationwide operation of the Network. Technological obsolescence of equipment is prevented by system-wide modification and replacement of component parts.

Characteristics of the receive equipment. A TI-IN site is equipped with a receive-only satellite antenna and the TI-IN audio-video (AV) cart. The AV cart is a self contained unit on wheels, making it transportable for easy installation in any room. Each cart has a television monitor for video reception of the instructor, a videocassette recorder for storing missed class lessons, four cordless telephone handsets with automatic dial to facilitate student and teacher interaction, an electronic writing tablet for written feedback, a satellite receiver, and the signal descrambling device.

For security reasons a dot matrix printer is stored in a locked compartment in the bottom of the AV cart. Tests and other written information are sent from the broadcast facilities via the satellite to each receive site, this information is printed out on the dot matrix printer. The talkback and copy distribution capabilities of TI-IN are made possible by use of a proprietary Multi Function Interface Unit (MFIU). The MFIU is stored in the AV cart.

The installation of the TI-IN hardware enables each site to receive two video channels with a total of over 20 hours of programming to select from. All interaction is live and made possible through toll-free telephone WATS lines. For user convenience, the toll-free WATS number is transmitted within the satellite signal and processed by the MFIU so that, with a flick of the button, located on the handset, the number to an instructional studio is automatically dialed.

Using the technology as a communications network. As the subscriber base increases and the programming resources grow, the TI-IN Network plans to expand to eight channels. Use of the Network for statewide or national meetings is expected to grow as adoption becomes widespread. Education administrators view the Network as a communications tool as well as an instructional medium.

User Evaluation of TI-IN

From its inception, the TI-IN Network, Inc., has been committed to the development of a long-term research plan. The application of this innovation within the context of public high schools is new. A comprehensive research and evaluation of the effectiveness of the media, course satisfaction by the users and the perceived ease-of-use of the hardware are critical to understanding the factors which contribute to a successful/unsuccessful adoption.

Research Overview

The TI-IN staff worked in conjunction with the Texas Education Agency (TEA) and the Region 20 Educational Center to evaluate the first year of operation. The TEA decided to collect data at the mid-year point, only. Comparisons in their study are drawn between the completion of a mid-term final by TI-IN students and students instructed in the same subject but in a face-to-face classroom. TEA's results indicate that there is no statistically significant difference between students performance in a TI-IN classroom and a face-to-face classroom.

TI-IN's approach is to collect a baseline of all the research populations. The baseline serves as a measuring stick whereby long term growth and development may be assessed. Too often this step in data collection is lost when a new technology is being implemented (Carey and Moss, 1985). The actual baseline was collected prior to system-wide use in September, 1985. Subsequent data collection points include, mid-semester course evaluations, a mid-year (end of first semester) and year-end evaluation.

Self-administered survey instruments were developed and administered to five research populations: TI-IN teachers, public high school administrators (the decision makers), TI-IN's classroom facilitators (monitors), TI-IN students (users) and their parents. The results of the administrator (decision maker) and student (user) data collection are the focus of the following discussion.

Rationale

The theoretical underpinnings of this evaluation are built on Rogers (1982) diffusion of innovation theory. In his landmark book, Rogers suggests that the rate of diffusion of an innovation is a process influenced by four interrelated constructs: (1) the relevant social system, (2) the timing of the adoption, (3) the communication channels and information used to learn of the innovation and (4) the attributes of the innovation. Rogers defines an innovation as, "an idea, practice, or object perceived as new by an individual or unit of adoption."

TI-IN offers a new technological innovation which is being melded into a traditional educational context, where face-to-face instruction is the long standing model. Public secondary educational institutions are the relevant social system for its adoption. High school teachers, students, administrators and support staff compose the adoption unit.

The criteria of "time and rate of adoption" are used to classify the degree of innovativeness of public school administrators. The five categories include: innovators, early adopters, early majority, late majority and laggard. Those administrators who implemented TI-IN during the school year 1985-86 would be classified as "innovators." Most of the "innovators" are administrators in rural school districts. They took the greatest risk by first adopting an enterprise, then unproven. 4

Purpose of the study. The purpose of this study is to understand the reasons for use and the trends of adoption. The research examines the motivations that underlie student use and administrator adoption. Expectations regarding the benefits and the utility of using the technology are examined through general attitudes, beliefs and specific attitudes toward change and innovation. Students evaluate the content of each course for overall course satisfaction. Demographic characteristics (ie., sex, age, media experience) of the users and decision makers are examined.

Establishing user needs for advanced math curriculum and handicap students. TI-IN has surveyed school administrators and teachers in order to determine the extend of both the need for math programs and for the specific advanced level math curriculum. A survey of hardware vendors to access technological status and school administrators to define the student population has aided in the development of new technological devices for physically and learning disabled students.

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4 For more information regarding the employment of the diffusion theory in the research design, refer to the article written by Pease and Tinsley, "TI-IN Network: evaluating the diffusion and adoption of an interactive-instructional satellite system." In, Lorne Parker and Chris Olgren Teleconferencing and Electronic Communication V. University of Wisconsin Extension, Madison, Wisconsin, 1986.

Overview of TI-IN's Special Education Projects

TI-IN Network is involved in two specific projects that are targeted for high school students with special education needs. While much of TI-IN's academic satellite programming may be especially useful to gifted and talented students, the two special projects allows TI-IN to develop curriculum and technological aids for not only gifted and talented students but, handicapped ones as well.

Adapting Equipment for Handicapped Students

In 1985, TI-IN was awarded a grant by the U.S. Department of Education's Educational Research & Improvement Grants. The project is referred to as Project Help: A project to aid handicapped individuals in the use of satellite educational instructional facilities.

Project Help is a multi-phased planning, research & development project. Phase 1, the planning and research phase, was completed at the end of the school year of 1985-86. Phase II, the development and implementation stage, will be complete at the end of the 1986-87 school year.

Summary of Phase 1: Data were reviewed from the Texas State Department of Education regarding the number of and types of handicapped students in grades K-12. A detailed breakdown of the number of and types of handicapped students within the schools who are TI-IN subscribers were determined. Basically, the population requires alternative ways for students to interact with other students and teachers (instead of voice-only).

Using the information from the data analysis, equipment modifications were determined based on the physical capabilities of the handicapped population. An extensive study was conducted of the research studies where technology was implemented for handicapped students and of the hardware companies who make adaptive technological devices.

In the end-of-the-year report, the major modification to the existing system was the addition of a digital data return link in order to allow forms of response other than just talkback via a telephone circuit. A digital return would enable students to use a variety of communication devices which require a personal computer. These devices include reading machines for converting printed material into synthesized speech; tactile pads for use by the blind and/or deaf, voice recognition machines, etc. Therefore, phase I with a conceptual design for modifying the TI-IN Network equipment (both classroom and studio/headend) for interfacing with computers. Though, the adaption of a digital interface will be used within the TI-IN Network, it can be made compatible with any satellite based system and with any type of computer-based communication aid.

Phase II: Modification has been made to the TI-IN headend equipment to allow the transmission of a digital signal through both the telephone lines and the television broadcast signal. Six TI-IN locations serve as the pilot sites where digital modification are in place. By the end of phase II an evaluation of the feasibility and satisfaction of the digital interface and communication aids will be reported.

The digitizing of a broadcast signal allows for the addition of a writing pad. When a student uses the writing pad in an interactive sense, the retransmission of the written word is sent to other receive sites where all the program participants may view the response.

The six pilot sites are testing several different communications aids. Each will be evaluated for their effectiveness. The writing pad is the communications aid that will become an integral part of the TI-IN Network in an effort to serve all students. The implications of Project Help and suggestions for the future are part of the final report in June, 1987.

The Mathematics Magnet School

The Region 20 Educational Service Center located in San Antonio, Texas, and the TI-IN Network are working cooperatively on a grant to establish a Mathematics Magnet School of the Air. Region 20 was funded under Title II of the Education for Economic Security Act, Secretary's Discretionary Programs. The Math Magnet Project is demonstrating that all students can have access to appropriate and high quality instruction through the use of existing state-of-the-art technology (ie., TI-IN's satellite based network).

The Math Magnet project began in January, 1987. In the first stage, Region 20 and TI-IN staff are identifying the following: potential participating sites, the specific math courses desired, the instructors and students. A mass mailing of TI-IN information packets that detail the Math Magnet Program is being mailed to all current and prospective Network subscribers across the nation. Interested schools will be given a detailed implementation guide explaining step by step student entrance requirements, equipment needs, costs, and local commitments necessary for success.

Secondary students are being selected on existing criteria. The Region 20 staff and nationally recognized experts in gifted and talented education will serve as consultants to participating schools. Localized committees of teachers, administrators, counselors, parents, and others will be established to select students; the advisory committee will meet throughout the first year. Local committees can meet as a national committee via TI-IN's network.

By late spring the courses and instructors will be identified. Instruction will focus on higher order thinking skills to challenge the gifted and talented student. Teachers selected for the project must have an outstanding record of performance in teaching mathematics to gifted and talented students. Tutoring will be a combination of live interactive television broadcasts, a toll-free "800" number and computer conferencing. Office hours will be established whereby students may call the instructor using a toll-free number.

To maximize the interactive attributes of the satellite network, course content, teaching strategies, and instructional materials will be developed. All course designs will be approved by the state agency to ensure that honors and advanced placement credit may be given.

Technologically, the TI-IN Network will expand the instructional capabilities of the present system by adding the computer and electronic writing boards. The computers will allow a computer bulletin board/messaging system to be established; all tests will be electronically tabulated using the computer interface. The writing boards (like the ones used in Project Help) will allow students to write questions and examples to math problems. Both communication aids add more overall interactivity to the instruction. The instructional effectiveness of the Math Magnet Program will be enhanced by the technological up-dates.

The Program is scheduled to begin in September, for the 1987-88 school year. Region 20 will conduct an multi-phased evaluation of the first year.

The Math Magnet Program is an exciting project which has national application. Using TI-IN's satellite based network allows students from small, rural and isolated sites to have equal access as their counterparts in large, urban ones.

Today, high school students located in rural districts such as, Dime Box, Texas, are successfully participating in credit bearing courses not before available. These students have classmates who are located in rural sites throughout Texas, California, Arkansas, Nebraska, Nevada, Oklahoma, Kansas, Iowa, South Dakota, Minnesota, Mississipi, Colorado, New York, Vermont and Michigan. For these districts, TI-IN offers an alternative for overcoming geographic and curriculum limitations.

By offering a "total systems approach," TI-IN is able to meet the conditions for success. First, TI-IN offers a service that is important to school districts. The overall evaluation of administrators (innovators) indicate that TI-IN meets their curriculum and budgetary requirements.

Second, TI-IN makes the technology and the programming compatible with user skills and norms. The technology is simple to operate. Installation requires no room modification for subscribers. The instructional techniques TI-IN teachers use are analogous to a face-to-face class, this minimizes the time users need for adjusting to TI-IN technology and programming. All instruction is live and interactive, students are expected to be attentive, to be active participants and to complete their homework.

Third, the cost of TI-IN subscription is competitive with the traditional face-to-face classroom. Administrators, who were subscribers last year, evaluated this system overall as "cost effective and less expensive than hiring a teacher."

The factors of compatibility, ease of use and cost effectiveness may explain why more administrators across the nation are adopting TI-IN. In September, 1986, the student population more than quadrupled to over 1450 registrants.

The TI-IN Network offers an opportunity to serve the special needs of students with high quality instruction and cost effectively. The state-of-the-art technology provides maximium use of student/teacher interaction via a wide variety of communication aids. The potential of the media is limited only by the imagination of administrators, teachers and students.

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Co-Presenters

Dr. David Bauman, Associate Professor
Northwest Missouri State University
WH 121
Maryville, MO 64463

Ms. Gail Rooad, Graduate Assistant
Northwest Missouri State University
WH 121
Maryville, MO 64468

General Topics Addressed:
Community Partnerships
Funding/Resources

Jerry Wright
David Bauman
Gail Rooad
Northwest Missouri State University
Maryville, MO 64468

THE IMPACT OF THE HANDICAPPED ON THE ECONOMY OF NODAWAY COUNTY

Nodaway County is a rural county in northwest Missouri and is the leading producer of agricultural products in the state of Missouri. The county seat is Maryville, a town with a population of 10,000 which has a regional university of 5,000 students. The county has a number of small manufacturing plants which have fewer than 200 employees. Eveready (batteries) and Northwest Missouri State University are the major employers.

Historically, Nodaway County has been a leader in providing services to the handicapped. The majority of these services are located in Maryville. County residents take pride in the fact that they've supported services for the handicapped. Nodaway County voters were the first to pass a county tax, Senate Bill 40, to provide services for the handicapped. In 1980, Maryville passed a zoning ordinance permitting group homes in single family, residential neighborhoods. The state legislature enacted legislation to this effect in 1985.

Residents of the county view the handicapped in a positive manner but nevertheless feel that they constitute a financial obligation to the residents of the county. This study is an attempt to view the economic impact of the handicapped from the perspective that handicapped persons are an economic asset to the local community.

This study will locate services for the handicapped within the county and determine how many state and federal dollars flow into the county as a result of the presence of handicapped persons. After this dollar amount is determined, economic indices will be applied which will measure the total effect of outside dollars on the economy of Nodaway County. The study will also determine the number of dollars generated locally.

While Nodaway County has some unique features, the results of this study can be generalized to most rural communities. The analysis procedures used in this study can be utilized in similar studies conducted in other rural communities. Results need to be shared with residents of local communities. In some counties, services to the handicapped will be a major producer of income within the community. This awareness of the economic impact of services to the handicapped may forge a new bond of friendship and understanding between the handicapped and the non-handicapped in rural communities throughout the United States during this time of economic crisis in American agriculture.

CONCURRENT SESSIONS

WEDNESDAY, MARCH 18, 1987

2:40 - 3:40 PM

Colleen A. Capper
Red Bird School
HC 69 - Box 710
Beverly, KY 40913

ACRES Conference Proposal

Title: Trisha: A Rural Case Study of a Multihandicapped Child in a Full Time Regular Class Placement

The purpose of this presentation is to describe one example of successfully serving a multihandicapped child in a rural public school.

Objectives for this presentation will be to answer the following questions that pertain to serving students with low-incidence handicaps in rural public schools:

1. How can initial evaluations be relevant to the teaching process as well as aid placement decisions?

2. How can IEP development be functional for the child, parents and teacher?

3. How does a data-based program aid curriculum and learning decisions?

4. How are resource persons utilized to compensate for lack of teacher expertise in areas of need?

5. What are some limitations or weak areas of this particular model?

6. What variables are present in this setting that have contributed to the success of this model?

This presentation is entirely rural focused because the case takes place in a rural school. Also, the presentation addresses many of the key problem areas inherent in serving rural special education students with low incidence handicaps, including, lack of resources, lack of trained personnel, and geographic and climatic variables, etc.

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To meet the objectives, the presentation will utilize slides, demonstration and lecture, to describe Trisha's typical school day from beginning to end. Time will be provided for a question and answer and open discussion session with participants. Copies of all program management materials will be made available to the participants.

Based on Trisha's specific needs, session topics will include behavior management strategies, total communication using sign language, pictures and speech therapy, teaching social skills, strategies for teaching self-help and daily living skills and integrating and adapting the regular primary classroom curriculum to meet the needs of all the students.

General Topic Areas:

Least Restrictive Environment

Curriculum and Instruction

Low-Incidence Service Delivery

Family-Professional Relationships

Interagency Collaboration

Health and Related Services

Janice M. Schnorr
Assoc. Professor
Northern Arizona University
Flagstaff, Arizona 86011

Training for Recruitment & Retention in Rural Areas

This presentation will focus on two training programs operated by Northern Arizona University. The Rural Special Education Program is a graduate level program that identifies rural school districts that have recruitment and retention problems. Prospective teachers for these districts are identified through a cooperative effort with the school districts. Once identified, these teachers make a commitment to serve rural schools for a minimum of three years in exchange for stipend monies that pay for their coursework as they pursue a Master's degree in special education. Most participants in the program work during the school year in their respective districts and complete their coursework during summer sessions. The Special Education Recruitment and Retention in Rural Areas (Sp. Ed. 3R's) Program is an undergraduate program that identifies undergraduate students who (1) come from rural communities and/or (2) wish to teach in rural communities. A minimum of ten students per academic year are funded. Both programs use similar strategies for recruiting students; these will be explained. A description of the unique features that stress rural education will discussed. Data regarding the success of the program will also be presented.

RELATIONSHIP BETWEEN REGULAR AND SPECIAL EDUCATION: A COOPERATIVE EFFORT

Richard Ballou, Director
of Special Education
CESA #11
1035 Eighth Avenue
Cumberland, WI 54829

During the past 20 years growth in local special education programs and services has taken handicapped children out of institutions, homes, and closets into public school classes. With this growth, schools are now dealing with handicapped children whose educational needs are far more severe than would have been envisioned even by the most enlightened educator, causing the educational profession to expand it's scope of responsibility from academic, social, and vocational areas to basic stimulation, maintenance, and lower level adaptive survival skills. In addition to accommodating the most severely impaired, special education has also reached out to the moderate and mildly handicapped and may well be on the verge of further expansion into a broader area of the special needs and at-risk populations. These students fall "between the cracks" as they often do not function well in the regular curriculum and are unable to meet eligibility requirements for special education. With the elaborate due process procedures in place, inherent difficulties in differentiating between the mildly handicapped and non-handicapped and the lack of flexibility and alternatives in the regular curriculum, continued growth in special education is inevitable. The immediate challenge for both regular and special education is to combine forces in identifying practices which produce the greatest opportunities for success within the regular curriculum. Such an effort will hopefully serve to improve opportunities in the mainstreamed environment for both the handicapped and special needs students. As a result there would be fewer referrals of non-handicapped special needs students and less opportunity for mislabeling these students as handicapped.

The purpose of this article is to discuss the growth of special education, the potential of over identification, and the efforts (of small schools in CESA #11, northwestern Wisconsin) to address these issues through local staff development with secondary teachers. The initial enthusiasm and ownership of the problem by secondary teachers is encouraging.

Growth In Special Education

While growth in special education has been most pronounced since the passage of state and federal mandates, states such as Wisconsin have a long tradition of commitment to handicapped children and have experienced steady growth in programs and services under encouragement of permissive legislation. By the mid 1960's a combination of regional institutions and public school classes constituted the bulk of services for those identified handicapped students. There were, however, a much larger number who were either unidentified or kept at home. With public attention and Child Find initiatives of the 70's, the race was on to screen, identify, develop IEPs, hire staff, and expand programs. Ten years later school districts throughout Wisconsin and the nation reported a nine percent handicap incidence, with states such as Massachusetts, New Jersey, and Rhode Island reporting 14 percent. Learning disabilities virtually undiagnosed 20 years ago now constitute 40 to 50 percent of all handicapped children. By 1986 the number of children at home is limited to a scarce few who, due to unique health problems, cannot risk public school attendance. Public residential programs often provide service on a short term basis, leaving the majority of handicapped enrolled in the least restrictive environment of the public schools. While the profession can be proud of their increased commitment to the handicapped, there is concern that special education is, or soon will be, asked to serve students who experience learning or behavioral problems in the regular curriculum but who may not meet the eligibility criteria as handicapped.

The process of identifying the moderate and severely handicapped and differentiating this group from the non-handicapped population is a relatively simple task that may not require extensive testing or evaluation procedures. In contrast, the process of differentiating the mildly handicapped from the non-handicapped or distinguishing between the handicapping conditions is a far greater challenge. Increasing the number of tests and evaluation procedures does not provide easy answers. With due process in place, classroom teachers and parents have come to use the multidisciplinary or child study team as a vehicle for confirming student problems and ultimately initiating alternative or remedial services. Since special education is perhaps one of the most viable services for students with learning problems there is pressure on the evaluation teams to confirm a discrepancy and establish eligibility for special education.

If at the secondary level 15, 20, or 30 percent of the student population have weaknesses in basic skills, and instruction in the regular curriculum is not adjusted accordingly, it is conceivable that referrals will be made to determine whether many of these students have a disability, a handicapping condition, and a need for special education. Evaluation teams which identify a significant percentage of these referrals as handicapped, coupled with the relatively low rate of special education dismissals can only lead to an increased need for additional programs and services. Furthermore, with the relative acceptance by parents and special education staff of a learning disability diagnosis, along with the inability of our standardized tests to differentiate between learning disabilities and other learning problems (Ysseldyke - 1982) evaluation teams will likely continue to identify more LD students. If we believe that 15 to 20 percent of the school population is handicapped we should get on with the evaluation process, seek the additional funds, and expand special education services. If, however, we believe special education should be reserved for only the most severely impaired there is need to more closely examine educational practices in both regular and special education. Weintraup states:

> "The special education population will continue to grow, as long as the public schools demand higher student performance; use singular standards to measure educational success; offer limited curricular options; are staffed by over worked, under paid and under prepared teachers; provide limited support services; and enroll more children with unique learning needs. To suggest that the growth of the special education population is special education's fault, or that special education alone can solve this problem, reflects a fundamental lack of understanding of the complex interrelationships operating within American education. (1986)

Lilly, in the same publication, expresses concern with the over identification of mildly handicapped, inefficiency in service delivery, and the need for supportive services in regular education for low achieving students. (1986)

Crossroads

Public schools are at a crossroads and will need to make a decision; to continue identifying handicapped children and expand special education services and/or examine content, instruction and expectations in the regular curriculum. If the choice is for self-examination, and solutions can be found within the regular program, there may be fewer referrals to special education, but equally important, those students who are handicapped and mainstreamed may find increased opportunities for success in the regular program. If it is difficult to differentiate the mildly handicapped from other low achievers and special needs students at a diagnostic level there likewise may not be a great deal of difference in their educational needs. Both groups, if indeed there are two groups, require support services in cognitive,reading, language, and study skills if requirements if the regular curriculum are to be met. There needs to be renewed emphasis on what is to be taught, how information is presented, and to establish appropriate expectations for a wide range of students with diverse learning needs. Questions relating to type of handicap or etiology have little meaning unless there are direct implications for instruction.

Staff Development

Inservice programs with highly paid consultants and one to two day presentations are often of little value when teachers return to the classroom without benefit of a built in follow-up plan. In meeting with administrators from local schools in CESA #11 it was agreed the priority was to re-examine issues relating to teaching special needs students in secondary schools and to utilize local teaching experts who cope with these students on a daily basis. It was agreed that each school had on staff a number of teachers who not only believed these students were best taught through the regular curriculum, but had a reservoir of methods and tricks of the trade to make the regular class experience a success. A plan was needed to identify these teachers, their successful practices and to provide an on-going staff development plan for these ideas and practices to flourish and grow.

The following represents the initial efforts and outcomes when staff from regular and special education were given the professional challenge and time to discuss ways of improving the educational environment for students with learning and behavioral problems. These inservice initiatives involved teachers from grades 5 to 12 and represented middle, junior high, and high school levels. Individual schools participating range from the smallest school with K-12 enrollment of 240 students to the largest with a K-12 of 1,500.

Effective Teacher Share Shops

It is generally recognized that some teachers, for whatever reasons, are more effective than others in working with this population of students. Schools participating in this staff development program were asked to identify those teachers who had demonstrated effectiveness in instructing special needs and mainstreamed handicapped students in one of the following required education classes: science, social studies, and English/language arts. Teacher selection was based on initial input from special education teachers and counselors with the final selection by the building principal. Once selected, a total of 33 teachers from 13 school districts participated in two one-half day share shops. Goals of the share shop were (1) to allow effective teachers to be recognized for their efforts on behalf of special needs students, (2) to allow for improvement in their skills through a sharing of successful practices, and (3) to identify those practices for distribution and inservice with other staff. All six share shops were held during the school day with substitute teachers and transportation costs provided by the respective schools.

Quality Instructional Teams

A second, but related feature of this staff development plan was the development and implementation of Building Teams designed to identify and successfully deal with instructional and management challenges posed by special needs students in the regular curriculum. The quality team concept was first developed by Bob Kindermann, a vocational education coordinator and agriculture instructor from the School District of Spooner, when he applied the "Quality Circle" concept, as used by industry in Japan, to a secondary school setting. Based on success of the Spooner "Breakfast Club" the concept was soon endorsed by other area schools as a vehicle for addressing on a continuum basis the problem of teaching and managing special needs students.

Schools developing the Quality Building Teams or Breakfast Clubs identified co-leaders from special and regular education to coordinate and facilitate the program. Following an orientation and training meeting at the regional level the concept was introduced in the respective schools. Throughout the school year teachers participating in this staff development program voluntarily attend weekly or bi-monthly meetings from 7:00 to 8:00 a.m., minutes are taken, and those teachers who attend are paid an hourly rate. Specific agenda items are determined by the teachers. The only prerequisite is that issues need to be pertinent to the special needs students in the regular curriculum.

Results/Implication

Secondary classroom teachers identified as being effective with special needs students tend to show the same frustration as all teachers when students fail to meet academic and behavioral expectations. These teachers, however, place greater value on the process of education, the importance of student's feelings, and the opportunities to experience success. They therefore are willing to abandon traditional approaches and seek alternatives in both their instruction and standards in order to bring about success and "keep kids in school." Specific results and recommendations of these share shops are found in another paper. (1986). However, it should be noted that reaction to this format was extremely favorable as evidenced by the degree of participation, personal comments, and a 3.85 overall rating on a 4.0 evaluation scale. As a result, a number of school districts are considering a similar format for future inservice.

To date, seven separate school districts have implemented a Quality Instructional Team or Breakfast Club and have staff meetings to identify and brainstorm solutions on a regular basis. Response has been highly favorable and while not all teachers participate, schools report approximately 50 percent attendance. One small school has bi-monthly meetings with 70 to 80 percent of all instructional staff participating. Issues discussed in these meetings are varied but tend to be consistent from school to school. Grading and student motivation are prevalent and reoccurring themes as teachers struggle with solutions to age old problems and, while it may be popular to explain student behavior or past experiences and parenting, the co-leaders attempt to refocus attention to issues and variables over which the teacher has control.

These projects have identified secondary teachers from participating schools who recognize the dilemma experienced by students with learning problems but feel frustrated with their own lack of skills and expertise in addressing the educational, personal, and emotional needs. Response from teachers suggests there have been limitations in the teacher training programs, especially at the secondary level, leaving teachers inadequately trained to effectively deal with special needs students through the regular curriculum. One high school English teacher noted, "We need training to learn some of the newer skills, especially those that are used by the elementary teachers. I was not trained to teach a class in basic English with students of such diverse needs." A junior high math teacher from one of the larger area schools suggests that staff development programs through the public schools have also been deficient in upgrading teacher skills. When learning of the share shops this teacher commented, "In my 24 years in this district I have not had one opportunity to meet with other math teachers to explore new ideas, strategies, or techniques." Both teachers are experienced and regarded as successful in their respective schools. A brief view of recent graduates in secondary education suggests that beyond survey courses in special education, the teacher training sequence is still lacking or fails to place sufficient emphasis on methods and strategies for reaching low achieving students through the regular curriculum.

Madeline Will, from the U.S. Office on Education, calls for a renewed commitment to serving children with learning problems through the regular curriculum through a partnership between regular and special education. (Will-1986) Share shops and quality circles as utilized in small rural schools focus attention on special needs students and provide an opportunity for regular and special education teachers to communicate in a problem solving forum. Individual working relationships are strengthened, but more important, an increasing number of teachers have identified with the issues and are forming their own building-wide informal partnerships.

Summary

Continued growth in special education with the potential for mislabeling of handicapped students looms as a threat to the field unless public schools are willing to re-examine current practices and seek alternatives for students who lack prerequisite skills for much of the regular curriculum. Cooperative efforts between regular education and special education, the identification of successful practices, and time to develop and nurture working partnerships are key ingredients to identifying and ultimately implementing alternative approaches. Involvement of secondary teachers in staff development activities such as Share Shops and Quality Building Teams has demonstrated classroom teachers are both sensitive to the need and willing to work toward a better system.

RESOURCES

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Richard Ballou
Betty Skapyak

Providing Effective Instruction For Special Needs Students

With expanded services to handicapped students and increased emphasis on educating the handicapped with non-handicapped peers in the least restrictive environment, special attention has been directed the past few years to helping the handicapped student cope within the regular classroom. This has resulted in pre-teaching concepts in the special education resource room, tutoring, modification of assignments and tests, and other cooperative efforts between regular classroom teachers and special education staff. There has also been the opportunity to identify creative exemplary practices of classroom teachers.

Without cooperation and effective instruction in regular education classes, there would be little successful mainstreaming, moreover, with the number of students, especially at the secondary level, who experience learning problems but do not qualify for special education services, these successful practices serve to reduce both student failures and the ultimate number of handicapped referrals. In an effort to recognize secondary classroom teachers who routinely meet the educational needs of a broad range of students within the regular curriculum and to identify their successful practices, CESA #11 and the SEIMC sponsored a series of Effective Teacher Share Shops involving secondary classroom teachers in science, social studies, and English/language arts. These specific content areas were selected because of their requirement for graduation and the degree of reading and written language skills which often represents problems for handicapped and special needs students.

Handicapped And Special Needs Students

Handicapped students are those who have gone through the educational process and have met eligibility requirements. Special needs students are those who generally achieve/function in the lower third of the class and may have many learning and adjustment problems frequently associated with the mildly handicapped. In light of findings which point to problems of differentiating the mildly handicapped from other low achieving students it was decided to focus discussion on students who function in the lower third of the class without attempting to separate this group into a number of sub-categories.

Teacher Selection

School districts participating in this project were asked to identify secondary classroom teachers who had demonstrated effectiveness in instructing special needs and mainstreamed handicapped students in one or more of these required classes. While it was anticipated that not all effective teachers from a single district would necessarily be invited to participate, selection was to be based on recommendations from departments with input from special education and guidance staff and final selection by the building principal. This process identified 33 teachers from 13 school districts and represented middle school through high school. The 33 teachers were distributed as follows: science-8, social studies-9, and English/language arts-16.

Share Shops

A share shop format was selected because of the popularity experienced with special education inservices conducted by the SEIMC over the past few years. Share shops are defined as semi-structured meetings in which colleagues with common interests, needs, and concerns are brought together to share ideas and brainstorm solutions. Agendas are generally pre-determined by participants based on common needs. A facilitator provides general leadership, arranges for notes or minutes, and serves to help keep the group on task. While the special education inservices are generally held after school, these share shops were scheduled from 8:30 to 11:30 a.m. during the normal school day. The participating school districts provided substitute teachers, transportation, and lunch. Two share shops scheduled four to six weeks apart were held for teachers from each of the three content areas.

Goals

Two specific goals were identified, one that would provide immediate feedback and assistance to the effective teachers, and a second involving a product that would, hopefully, be beneficial to teachers and schools not involved in the actual share shops. The goals were as follows: (1) to allow effective teachers to improve their skills through a sharing of ideas with colleagues, (2) to identify successful practices for sharing with other schools.

Organization/Structure

Prior to the initial share shops, effective teachers chosen by their respective schools were mailed a brief description of the project outlining the goals, the process, and their responsibilities. Specifically, teacher responsibilities consisted of attending the two share shops and participating in the discussion of ideas and practices found to be effective with special needs and mainstreamed EEN students. CESA #11 staff was responsible for organizing the meetings, taking notes, and preparing a summary. As an added incentive teachers who attended both meetings were eligible for six clock hours to apply to the equivalency clock hour requirements.

As an introduction to the initial meeting teachers were presented a brief overview of the project with emphasis on the relationship and similarities between special needs and mainstreamed handicapped students who are enrolled in their required or basic classes in regular education. Teachers were reminded to direct their attention and discussion to the lower 20 to 30% of students in these classes. In an effort to provide structure during the initial meeting teachers were asked to identify what they believe to be true regarding students, teaching approaches (strategies), and the curriculum. From this sharing of beliefs and practices would evolve the attitude, ideas, and suggestions behind their teaching success. The following summary has been divided into three sections: philosophy, strategies, and testing and grading.

Philosophy

From the interaction and discussion of the six meetings (two for each content group) it was clearly evident that what these effective teachers believe to be true regarding teacher, students, and the overall purpose or goals of education have tremendous impact on how each day and every decision regarding students and teaching is approached. This is not to imply there was necessary consensus on each idea of why kids do or do not perform or comply, or how far the teacher or school can or should go in behalf of an individual student, but the reoccurence of certain themes made it clear where effective teachers stand on the broaders issues and the importance of their beliefs in dealing with the day to day teaching challenges. To summarize some of the key points; content must be taught to all students and is best taught by content specialists; by teaching kids rather than content all students are capable of learning at least some of the essential elements; the process of learning and the affective content with the feelings and attitudes that are taught are more important than particular facts or skills from the course content; and, kids need to stay in school.

If there is value in teaching science, social studies, or English the value is equally important to the low achieving student who may not share the same educational goals of more skilled classmates but who can benefit from the process of learning and the specific skills which are mastered. The content teacher is best prepared to know what skills are important and the sequence in which they should be taught. Content specialists may need help, however, from the other specialists in both regular and special education in determining learning styles, how much can be learned, and how to make the content real and more personalized. Recognizing special needs students may not master all the skills in the curriculum, content specialists often need help from administration in establishing alternatives to accommodate the diverse learning needs. Setting different expectations for different students is essential and may be more acceptable to student peers and parents than colleagues in education. However, by planning for different levels of mastery, individual growth will occur and be more readily measured. Conversely by maintaining singular standards, lesser degrees of attainment may go unrecognized and be expressed as failure.

Another reoccurring theme is the often noted claim that teachers must teach kids not content. This practice directs effective teachers to continually structure and modify their day to day activities around interest and values of individual students rather than be dictated by a pre-determined course of study. To the extent possible effective teachers express the need to establish personal relationships with special needs students and learn of their interests and goals in order to make content real and compatible with the individual. This is especially important for the special needs student who may not share the same academic expectation or goals of other students in the same class. The more functional the content, the more easily it can fit into the student's world and the greater chances it will be learned and retained.

While effective teachers are concerned with students acquiring knowledge and mastering specific subject matter content, priority is also given to the emotional values and climate in which learning takes place. Feelings and attitudes growing out of experiences in school are more likely to be learned and retained than the particular subject matter concepts, therefore the purpose of education and the affective messages are of greater importance than the academic product. The challenge of teaching is to create an environment from which the special needs student is able to experience success while developing healthy and realistic expectations of self. Only positive feelings and experiences produce truly healthy outcomes.

Finally, effective teachers believe learning is a joint responsibility shared equally by teacher and student with both needing to be accountable. Success or failure must therefore be viewed in both student and teacher behaviors. All students must be prepared to work and special needs students may need to work harder than others to overcome a long history of failures. Teachers must be prepared to accept students with different attitudes and skills, adapt methods and instruction, and allow students to believe that they can and will pass their course.

Teaching Strategies

Effective teachers acknowledge that teaching special needs and low achieving students requires extra time, effort, and commitment. Student limitations in reading, writing, spelling, organization skills, study skills, and attending behaviors create questions of effectiveness in the traditional approach of "read the chapter, answer the questions, and study for the test". Effective teachers stress the importance of accommodating and compensating for student needs, communicating with students, and allowing for individual success.

Accommodating students in the regular curriculum requires an understanding of learning styles and a variety of instructional activities to match these styles. It is also necessary for teachers to know individual student strengths, limitations, and weaknesses. Knowing this, allows teachers to vary presentation formats, adjust assignments, provide study guides, monitor frequently, structure tests and worksheets along with many other teachers to accommodate their students. One key to success within their teaching repertoire is the ability to be flexible to meet the challenge of teaching all students.

These teachers stress the importance of communicating with their students. They also view students as individuals, showing concern for their individual achievements. They emphasis the need to communicate their expectations and specific learning goals including letting students know exactly what they need to know and what is required to earn a given grade. In addition to this effective teachers clearly establish what content is important and what needs to be learned without secrets or surprises. Once goals and procedures have been established, teachers need to direct, monitor, give on-going beedback, along with acknowledging their efforts to achieve these goals. How well teachers communicate is critical. Relating content to students' lives, appropriate language, teacher modeling, and positive reinforcing are ways teachers communicate effectively with their students.

Allowing for all students to experience success, takes much time, creativity, and commitment on the part of the teacher. Effective teachers structure their classes so all students are able to receive a passing grade; anything short of this goal may reflect some failure on the part of the student and teacher. Adjusting reading levels, frequent checking of student progress, varying testing techniques, and organization systems all contribute to students' success without jeopardizing quality of content taught. Providing for student success also allows the student the potential to develop self-confidence and view learning in school as a positive experience.

Teaching low achieving and special needs students in the regular curriculum is a challenge to all teachers. Looking at students as individuals, assessing their needs, and adjusting curriculum is a demanding charge made of successful classroom teachers. The rewards effective teachers experience of greater achievement and student satisfaction more than compensate for this extra time and effort.

Some of the successful practices and activities identified by these teachers include:

- match reading level of material to the student
- provide alternatives to reading the material. i.e., teacher reading, tutor reading, etc.
- use testing as a teaching tool:
    - identify for the student what needs to be learned
    - use a variety of testing formats i.e., oral, short answer, essay
    - make sure the student has the appropriate notes before studying for a test
    - allow for the students to have enough time to take the test
    - visually arrange the test so that it isn't intimidating as to length
    - have students correct their mistakes on tests and reward for doing so
- help the student develop an organizational system for their notes, paper, and assignments and to be prepared when he/she comes to class
- monitor students and check their progress on assignments and demand the completion of assignments
- provide study aids; this might include identifying short term goals, time lines, resources, outlines of lecture notes and highlighted textbooks
- give students alternatives for assignments

Effective teachers stress the need for variety and flexibility in the teaching strategies they use with their low achieving and special needs students.

Tests, Testing and Grading

The area of grading in secondary schools causes stress in teachers and special needs students alike and perhaps needs to be re-evaluated if not entirely revised. Under current practices many teachers feel bound by a system which they feel fails to recognize the diverse needs and skills of students by requiring a single standard for all students. While this single standard is easy to administer when based on a percentage or bell curve, it perpetuates the concept that all students are equally capable of mastering the content. Students with good skills are able to obtain acceptable grades with minimal effort while those with special needs may exert considerable effort but still fail to meet mimimum standards. Effective teachers expressed the need for greater options in grading special needs, if not all, students.

Testing and grading should be used to provide information to teachers and students on what is being learned, what has been missed, and for the teacher, how to direct future instructional activities. Good test scores and grades reflect successful teacher and student effort, while less satisfactory outcomes reflect teacher and student shortcomings which need to be addressed. While many teachers would prefer to grade on a combination of progress and effort on a more individual basis, they often sense direct and indirect pressures from school and community to establish a uniform procedure for all students. To help special needs students compete, a variety of strategies are used to test progress and provide maximum opportunity for successful grades.

As a teaching practice, effective teachers clearly outline what students are to learn and advocate that assessment of learning should involve no surprises! Information students need to know for tests must be clearly understood. Whereas higher achieving students should be tested on a combination of knowledge and application, special needs students may not be able to successfully demonstrate learning at the higher conceptual levels. Special needs students are also less able to succeed when final grades are based on single measures that cover large amounts of material. Successful practices therefore call for more frequent tests and a variety of opportunities, such as reports and projects, for students to demonstrate participation and learning. Consistent with the theme of using tests as an instructional tool students must complete assignments and tests and be allowed to re-take a test to improve a grade. Special procedures such as oral tests are encouraged for students who lack sufficient reading, writing, and spelling skills or for individuals who experience psychological problems and perform below their own standards on more formal written tests.

While teachers consider themselves to be paid for teaching rather than testing, assessment and measurement of growth are essential features of the profession. Fulfilling this aspect of their professional duty often leads to frustration when dealing with the special needs population.

Response To Share Shops

The objective of the Effective Teacher Share Shop was to bring effective teachers together, asking what they do in their classrooms to accommodate students who do not learn as well from traditional teaching approaches. The goals of this sharing forum was to identify common characteristics, attitudes, and basic philosophies along with specific teaching strategies which could be shared with other teachers. Efforts were rewarded with an enthusiasm for this sharing. Teachers enthusiastically responded to the challenge and the opportunity of sharing with their peers.

Teachers viewed themselves not as effective teachers, but as teachers willing to try different things and eager to learn what others are doing. The share shop provided an opportunity for teachers to do this. Using one another as a sounding board, they candidly aired frustrations and problems inviting input from their colleagues. This challenge was met by an eagerness from the participants to share ideas and suggestions of what worked for them. The comment "I was very enthusiastic about some of the assignments, techniques, and hints for motivation that I'm anxious to try", reflects the mood set by the teachers.

The value of the share shops was not only evident in the animation and enthusiasm of the participants, it was also measured in the feedback from the written evaluations. Comments such as "I feel a new enthusiasm", "it bouys the spirit to hear colleagues discuss their class" and "it gave me a big boost and a pat on the back" echoed the comments of others. The near excellent rating in all areas including personal value and applicability toward teaching, reinforces the informal feedback from the group.

Identifying commonalities of these teachers, became secondary to the need to provide opportunities for teachers to come together to share. When asked how this information should be disseminated, one teacher commented "(distribute an outline) even though it would not adequately exude the enthusiasm we felt." Although persistence, humor, and genuine enjoyment of teaching were identified among common fibers woven into the basic philosophy of effective teachers, the focus should be placed on the sharing and not identification of these traits. Providing opportunities for first-hand sharing with colleagues was viewed as a valuable need to perpetuate effective teaching traits and reinforce teachers in their efforts to teach students with special needs.

Summary

Share shops provide a forum for teachers to share ideas, help problem solve, and minimize the daily frustrations of teaching. While this project has focused on the effective teachers and special needs students, it is clearly evident that the format has implications for all aspects of education. It is an efficient and effective means of providing on-going inservice and should be part of any school's comprehensive training program.

Dr. Evelyn C. Lynch

STRATEGIES TO FACILITATE INTERAGENCY TEAM PLANNING AND COORDINATED SERVICE DELIERY FOR INFANTS, TODDLERS AND PRESCHOOLERS WITH SEVERE HANDICAPS AND THEIR FAMILIES IN RURAL COMMUNITIES

ADDITIONAL PRESENTOR:
MS. ROBYN WIDLEY, COORDINATOR
CLAY COUNTY COORDINATED PRESCHOOL PROGRAM
MOORHEAD, MN 56560
218-236-2006

STRATEGIES TO FACILITATE INTERAGENCY TEAM PLANNING
AND
COORDINATED SERVICE DELIVERY
FOR
INFANTS,TODDLERS AND PRESCHOOLERS WITH SEVERE HANDICAPS
AND
THEIR FAMILIES
IN
RURAL COMMUNITIES

OVERVIEW

The Clay County Coordinated Preschool Program (CCCPP) is a comprehensive program for infants, toddlers and preschoolers with handicaps and their families located in rural northwestern Minnesota on the North Dakota border. The CCCPP is a coordinated effort of the six school districts in Clay County, two special education cooperatives, Clay County Health Dept, Clay County Social Services, Clay-Wilkin Opportunity Council (Head Start) and Moorhead State University through which comprehensive services are provided in age-appropriate, integrated environments. Interagency coordination is evident at the administrative and direct service levels with the public school serving as the lead agency. In 1986, the CCCPP was awarded first place as a Program of Excellence for School-Community Partnership by the Minnesota Rural Education Association.

PURPOSE

The presentation will focus on strategies to facilitate comprehensive service planning and delivery by multiple agencies with differing fiscal and administrative responsibilities. The CCCPP has an eight year history of program development and implementation of a model that parallels the mandate of PL 99-457. The presentation will provide specific methods to overcome barriers to planning and provide materials to facilitate such planning. Information related to design of transdisciplinary teams and active parental decision-making will be shared. The process used by the CCCPP in the design and implementation of the Interagency Child and Family Plan will also be presented with supporting data. Evaluation methods appropriate to interagency programs will also be shared and distributed. The processes and procedures that have proven effective in teaming, professional development, and allocation of direct service responsibilities will also be presented. Procedures to encourage and maintain interagency administrative cooperation and support will also be presented.

The CCCPP is currently funded as an Outreach project with an emphasis on interagency coordination in rural areas. This program demonstrates that high quality programs using a variety of resources and differing administrative structures is effective in less densely populated areas. The anticipated outcome of this presentation is not adoption or replication but the application of the processes that are effective in our community to other locations.

M. Winston Egan
Associate Professor
University of Utah
Salt Lake City, UT 84112

INTERACTIVE INSTRUCTIONAL TELEVISION: A COMPARATIVE STUDY OF INSTRUCTIONAL EFFECTIVENESS

General Conference Topical Areas: Research, Technology, & Certification

The research report will highlight three years of study regarding the instructional effectiveness of two-way interactive television in delivering university courses to rural/remote inservice and preservice special educators in five Utah communities. Quasi-experimental designs have been employed in each course study. Results of each of these studies will be shared with conference participants.

The control group in each study was composed of on-campus inservice and preservice teachers who were enrolled in the various certification courses. The experimental groups in each study was also composed of inservice and preservice teachers who were in training.

A variety of effectiveness measures have been utilized to compare the effectiveness of the two-way interactive television. These include academic pre and post-tests, course evaluations, and media specific evaluations. In two of the studies, correlational analyses were used to assess the relationships between various demographic features including years of previous teaching experiences, motivation for taking the course, and other previous course related experiences to learning performance, various course evaluation factors and media related factors.

A variety of appropriate data analysis procedures were utilized to assess the various hypotheses associated with the studies. These included covariate analyses of pre and post-test learning performance, chi square analysis of dichotomous ratings, _t_ test analysis of selected media related factors as well as course evaluation factors. The investigators will also address information drawn from selected qualitative measures related to the instruction provided. In summary, the research report will provide conference participants with an in depth perspective of the effectiveness of delivery instruction via two-way interactive television to students in training in rural/remote communities in Utah.

June Canty-Lemke
Dvenna Duncan

The COMMUNITY BASED PROGRAM TRAINING CONSULTANT TEACHERS TO SERVE SPECIAL EDUCATION STUDENTS IN THE LEAST RESTRICTIVE ENVIRONMENT was organized in a manner that matches the strengths of the University's training program with the needs of the teachers and handicapped students in the targeted school districts.

These general strengths and needs are outlined below:

__The Small Schools__:

Strengths:

1. Practical knowledge of needs in small schools
2. Teachers with a commitment to work in small schools

Needs:

1. Personnel on-site with training and certification to serve handicapped students in the LRE
2. Practical service delivery model
3. Contact with the faculty at the School of Education
4. An ongoing support network

__The University__:

Strengths:

1. Knowledge of current research in education
2. Personnel for on-site training
3. An ongoing support network

Needs:

1. Practicum training site
2. Input on the needs of teachers in small schools

As stated in the previous section, this project was made up of three major components:

1. Recruitment and training in the consultant teacher model;
2. Development of a consultant teacher practicum training site; and
3. Fostering of the interactive network

In order to simplify this proposal, each component was discussed separately, followed by a description of component coordination and the role of the director.

Management Plan

Management of the project was conducted by three coordinators. The project director was responsible for insuring ongoing cohesiveness and establishment of a systematic support network. This plan was devised in order to make the project as university-wide as possible and to capitalize upon the strengths of individual School of Education faculty members.

The objectives of each component have been outlined and discussed in the PROGRAM CONTENT section of this proposal. This section will focus on interaction between the three components. Timelines and staff responsibility are presented. The qualifications of the staff are discussed under QUALITY OF KEY PERSONNEL section in this proposal.

Recruitment and Training

The coordinators and project director selected the targeted areas and recruited the teachers who participated in the project. The schools included in the selection process were all schools in Oregon and Southwest Washington that qualified as "small" schools. Transportation, communication and need were major considerations in determining the specific participants.

After the targeted areas were selected, the training model coordinator scheduled a series of informational workshops in which specifics about the program were shared with the regular education teachers at both the elementary and secondary level. Twenty-five teachers were selected to participate in the program to receive preservice training in special education competencies and in the consultant teacher model. In order to be eligible, the teachers had to possess a regular education certificate at either the elementary or secondary level (as required by state law), be employed by a small school in Oregon or Washington, meet University Graduate School requirements, and be committed to participate for the entire three year program. All project staff participated in the selection process with the goal to choose teachers from at least seven schools. After selection, the teachers applied to the University Graduate School and were assigned as academic advisees to the coordinator of recruitment and training.

Coursework began Spring semester of the first year of the project and followed the schedule listed below:

Spring 1988: Introduction to the Exceptional Child
Summer 1988: Using School, Parent and Community Resources
Diagnostic & Prescriptive Teaching
Field Experience in Practicum Site
Fall 1988: Interpersonal Relations
Spring 1989: Language Development of Exceptional Children
Summer 1989: Special Education Methods and Materials
Special Education Practicum
Fall 1989: Advanced Behavior Modification
Spring 1990: The Consultant Teacher
Consultant Teacher Practicum

The courses were taught on-site by University faculty.

Consultant Teacher Practicum

As discussed earlier, the purpose of the second component of this project was to provide an on-site consultant teacher practicum experience. The UP WITH KIDS program model was used to provide this experience.

The coordinator of this component contacted school administrators in the targeted areas to identify a site for the program and coordinated the dates for the program with the University Registrar. A brochure describing the program was sent to parents of students living near the selected site and applications from students were collected. The students selected represented the following subgroups: approximately 50 from regular education; approximately 25 from gifted and talented programs; and approximately 25 from the mildly handicapped programs. University faculty and master teachers were identified, hired, and assigned to teach the classes.

Interactive Network

The purposes of the third component of this proposal were to establish ongoing communication and training programs for the teachers while the University faculty were not on-site and provided the teachers access to an ongoing system of resources and support. In order to accomplish these goals, an interactive video/ microprocessor network was established. Immediately after selection of the teachers and schools who participated in this project, an assessment of their computer and video cassette recorder resources were conducted by the coordinator of this component. The coordinator worked with the schools' staff to order and install any hardware needed to complete the interactive video/microprocessor systems which were then compatible with the system already in place on campus. The participating teachers and other staff members in their buildings were then trained to use the systems for coursework throughout the project.

Another feature of the interactive network was the SpecialNet system which was made available to project participants. The coordinator of this component arranged for SpecialNet subscriptions, purchased modems, and supervised installation of the system in the computer in each of the seven participating buildings. Building staff and project participants then received training in use of the many features of the system.

Overall Coordination

In order to assure overall coordination and quality of the project, one faculty member was assigned the function of overall coordination. The major duty of the project director was to oversee project activities to insure completion of the various components and to weave them into a cohesive program. Specifically, the director performed the following duties: served as a liaison between the project staff and the University administration; chaired regular meetings of project staff to facilitate communication among the various components; managed the project budgets; developed the support networks; arranged press releases; and other related duties deemed necessary by the director and project staff members.

Bernard E. Hannon
Julie Ingles
Cooperative School Services
Monnett Administration Building
Rensselear, IN 47978

Prospectus:

"Interventions in Rural Special Education"

The paper, the presentation, will address issues, trends and suggested practices about intervening in early child education to either prevent or ameliorate the placement in special education. Considering the nature and make up of small rural schools every effort must be made to teach child who are at risk rather than dumping them into special education programs.

We will discuss critical issues in Language Development, the best use of resource teachers, regular teacher in-servicing, utilization of community resources, including our universities, parent/school partnerships and other useful and practical implications concerning Special Educational Intervention.

This should be of interest to teacher-trainers, parents, public school personnel and related services personnel. The presentation can be easily completed in fifty minutes, with ample time for audience participation. We will have materials and papers to share with our participants.

We believe that a frank discussion of practical intervening techniques in today's Rural School for the benefit of "marginal" children is warranted. The presentation would be tailored to our ACRES participants and quite in-line with our ACRES philosophy.

The manuscript for this presentation is scheduled for editorial review by The Indiana School Boards' Educational Journal, for spring 1987 publication.

Bernard Hannon

B. Hannon, J. Ingles
Directors of Special Education

Intervention: The "ART" of Interfering

by

Bernard E. Hannon & Julia K. Ingels
Directors of Special Education

Presented at the ACRES National Conference, Asheville, March, 1987

Bernard E. Hannon, DSE
Rensselaer Area Cooperative
In Special Education
605 Grove Street
Rensselaer, Indiana 47978
Phone: (219) 866-8540

Julia Ingels, DSE
Boone-Clinton-NW Hendricks
Joint Services
300 South Third Street
Frankfort, Indiana 46041
Phone: (317) 654-7206

ABOUT THE PRESENTERS......

The Hannon/Ingels team covers a vast amount of prime rural county in North Central Indiana. The two Joint Services Special Education Cooperatives represented by the presenters encompasses eight large counties, 15 public school districts and a school base of approximately 25,000 students.

Both Bernard and Julia are directors of special education. Julia has taught orthopedically handicapped, mildly mentally handicapped and learning disabled children. She has served as a consultant and understands the process of intervention and interference. Bernard began as a speech and language clinician, taught mildly mentally handicapped, worked as a school psychologist and consultant in learning problems.

Both of the presenters are well known in their respective areas, active in state level programming and known for their work, writing and contributions at the national level. Both Julia and Bernard are active ACRES members.

In the discussion of intervention, of interfering, let us at the outset define these terms, reveal our intent and talk about the range and kind of children in our target area. To intervene in this instance means simply to modify, to hinder probable future failure. To interfere in this case is to affect change, to support intervention in a positive, constructive and "artful" manner. Our intent in the matter of intervention and interfering is to prevent and/or off-set failure at an early age. The target area that we define will be pre school age through the primary grades. Ideas, concepts and practices applicable toward intervention and interference would have useful implication and merit in the intermediate grades and beyond with appropriate modification.

We are of the opinion that carefully planned intervention has extensive merit. We are also aware that the best planned program of intervention without useful follow-up (interference) is marginal at best. We are among the growing number of special educators who realize that every failing child should not be placed in special education or that the roles of special and regular educators prohibit coordination in the important matter of intervention, of intervening to strengthen problem areas for young children.

In our area, in our rural counties, we must find ways and means to work as a team with regular educators just to keep up with day to day needs. Planning, coordinating, sharing, traveling and conferencing do indeed absorb both time and energies. We believe that some time should be reserved for the prevention of problems in the development of the child that might be corrected through proper attention and useful intervening. Too many of us are locked into what Lieberman (1984) calls a "discrepancy model".

Schools wait for the child to fail then an attempt is made to do something about it. We, as special educators, talk a lot about prevention but do little to become involved. It seems that too many of us are willing to trudge along accepting failure rather than attempting to prevent it.

Our discussion will center around intervention taking place in our rural schools at this time as well as organizing and planning for "Artful" interfering. In developing an Indiana based program it was known that the consensus of researchers agreed that early intervention programs are beneficial to at-risk children. It was suggested that a very structured program which begins at the earliest possible age will produce the best results. It was also realized that the immediate benefits tend to disappear about 60 months if meaningful follow up is not involved Castro and Mastropieri, (1986). The advisability of a continuous intervention program was taken seriously by a group of Indiana people.

To address this issue the Boone-Clinton Northwest Hendricks County Joint Services Cooperative in Frankfort, Indiana, utilized three phases of intervening techniques. The areas addressed were: 1) a preschool language enrichment program, 2) kindergarten screening with an accompanying structured intervention program and, 3) consultant services to regular education classroom teachers.

The pre-school language development program was developed by four Clinton County public school Speech-Language Pathologists - Jill Buhler, Sharon Druley, Deb Lewis and Linda Swick. Due to a large number of students identified by these clinicians as being language deficient upon entering school, the need to reach children at an earlier age was recognized.

Therefore, attention was focused on the critical growth periods of ages birth through five years. To address this need, the Home Expansion of Early Language Skills (HEELS) program was created to increase parent-child communication in the home setting.

The HEELS handbook was not meant to be a technical training manual but rather a set of practical suggestions to encourage language development. The program could be used by parents or anyone involved in a care-giving relationship with pre-school children. HEELS provided language development activities and suggested books and toys. A collection of local community clubs and organizations which might be helpful resources to parents was also included.

Although this material could have been utilized in pre-school programs for handicapped children, it was primarily written for use with parents whose children had been identified as "children in need of services" due to the parents' abusive or neglectful behavior. Approximately 50-75 children per year fall into this category in this particular county.

Armed with various materials which focused on parenting skills and the HEELS program, a case worker from the county welfare department met with parents in their homes an average of three times per week. The parents were seen for a minimum of six months. The case worker assisted the parents in parenting skills, dealing with problem behaviors and the development of language skills for their children. Although this program is in its infancy, no relative data has been collected. However, it is assumed by the staff involved that this intervention can only have positive effects for the children.

The second stage of intervention started at the time children entered the school system. This phase began with the use of the Kindergarten Inventory of Developmental Skills program Ingelmender (1979) during kindergarten screening. The KIDS program is a screening device, not a standardized test. Therefore, children do not pass or fail the screening. Their processing and academic skills are simply identified for the teacher. The areas assessed are gross and fine motor control, visual processes, auditory processes, language skills and reasoning abilities.

Perhaps the most commonly associated words with KIDS is "practical". The screening results are recorded on individual file folders. These folders not only provide a concise method for recording screening information, but they also serve as the child's year-round progress report. Through the utilization of the recommended multi-colored marking system (blue for screening, red for skills learned first grading period, etc.), the amount of pupil progress made each period may be monitored throughout the year. The folder also provides an excellent reporting guide for use when talking with parents.

The KIDS program adds a second dimension, that of providing appropriate activities to develop and/or remediate each area which has previously been screened. A Teacher Handbook combines a convenient listing of materials and activities, leaving room on the contract page for teachers to add their own materials. This approach adds management possibilities for the entire kindergarten program. A Parent Handbook has been included in an attempt to bridge the gap between school and home. This handbook includes learning activities, as well as recommended toys, books and magazines.

To determine the effectiveness of the KIDS program a follow-up study was conducted to investigate the relationship between the KIDS program and subsequent standardized test performance of students on the Metropolitan Readiness Test. In addition, the intervention program which accompanies KIDS was examined to determine its effect on standardized achievement scores. The data collected was based on 290 rural students entering kindergarten during four consecutive school years.

Multivariate analysis of variance (MANOVA) was used to analyze the data. The independent variable was no kindergarten screening, screening only, screening with intervention, and screening with intervention based on the KIDS program. Metropolitan Readiness Test subtest scores were the dependent variables measured. Post-hoc Scheffe' comparisons (Kirk, 1968) were utilized.

In all statistical tests the .05 level of confidence was used to determine statistical significance. The means and standard deviations for each dependent variable by group are presented in Table I. Table 2 contains the results of the univariate and multivariate tests of significance conducted in the data analysis.

The Manova multivariate analysis of variance resulted in the F-ratio of 23.26 which was significant at the .0001 level (df = 21,804). This relationship was analyzed further by examining the univariate F-ratios for each of the dependent variables. Based on previous data analysis, post-hoc Scheffe' comparisons Kirk (1968) were investigated to identify significant differences. Table 3 displays the results of the comparison. Analysis of the data revealed a significant difference between subtest scores on the MRT when no screening program was present versus scores obtained on students who underwent the KIDS screening program with follow-up intervention. With the exception of the Rhyming subtest, all areas assessed by the MRT consistently indicate the KIDS screening tool results in significant differences.

The third phase of the intervention model is the use of consultants working with regular education teachers. These consultants are employees of the Joint Services Cooperative and have teacher certification in several areas of special education. Whenever a teacher is concerned about the progress of a student in his/her classroom, they have the option of contacting a consultant for assistance. The consultant is then available to observe in the classroom and discuss the specific difficulties with which the teacher is concerned. Suggestions for modifying materials, alternative methods of introducing concepts and possible behavior modification procedures could be discussed. Teachers are encouraged to keep accurate and consistent records regarding the child's response to the new techniques utilized. The consultant could then review these results for possible modifications. In addition, the consultant can aid in locating special materials from which the child may benefit.

It is the consensus of the Indiana based team that the consulting model appears to be very effective in reducing the number of referrals for formalized testing. In addition, although the responsibility of the students' education remains with the classroom teacher, that teacher has a support system which encourages his/her extra efforts. Further, the trend toward indirect services is seen as a viable option in serving the increasing numbers of students with learning and behavior problems. The use of consultative services may not only reduce inappropriate referrals for testing, but also reduce inappropriate placements in special education and provide relevant, needed intervention assistance to students and teachers in the least restrictive environment Graden, Casey and Christenson (1985). Having presented one working rural model, attention should be directed toward organizing for intervention.

Upon establishing a good working relationship within the Joint Services Cooperative, the Frankfort Central staff has maintained, improved and widened concepts of intervention and interference within their jurisdiction. Their model is now widely shared and viewed as a viable and successful approach to preventing failure in the rural school through timely intervention. Their concentration on preschool language, kindergarten screening with its accompanying structured intervention program and the consult services to regular teachers has had a very positive impact in our rural setting.

We have, it seems, concentrated on aspects of intervention and may need to speak, at least briefly, to interfering or the "ART" or act of interfering. This may well be that part of intervention where best intentions end. It is difficult, very tough indeed, to suggest change, improvement of method or differing approaches to learning to seasoned teachers. Although a smiling face and a winning attitude seems essential in the process of interference, the reason, the rationale and basis for intervention and interference should be understood and agreed upon if progress is to be made. There must be some mutual agreement between the specialist and regular teacher that each has his or her unique qualities and that in concert the child will be better served.

There seems to be no magic formula in affecting productive interference. The consultant should attempt to provide strategies, materials and teaching techniques that matches most closely to the style of the classroom teacher who is attempting to work with the child in question. As the children differ so must materials, methods and techniques. The team concept is particularly important in the interfering process. It does indeed become an art when all concerned converge, understand and progress toward improvement, with the child the center of focus. Intervention and its counterpart, interference, requires extensive planning. There is a place and a time to start.

In any worthwhile endeavor, in affecting change, in living and working with people, one starts where one should start, at the beginning. At the outset there should be a sharing of concern, the indication that change is possible and that proof of timely intervention is both warranted and beneficial toward off-setting failure. As special educators, particularly rural based specialists, we tend to attempt to be everything to everyone probably because there just are not enough of us to go around. The end effect is an overload and a diminishing of effectiveness to all concerned. Hannon (1984) stressed the importance and significance of developing partnerships in rural education to enhance the quality of education. His emphasis was upon opening lines of communication between district policy makers (School Boards) and responsible school personnel who manage and maintain educational programs Clabes (1985) presented a host of useful and practical ideas concerning "teaming for education". She involved a wide range of personnel and resources including the school community. The issue, the point, is that intervention and interference (attempting to strengthen or correct) cannot be done alone nor by some hoped for miracle that others will assume responsibility. Clabes' article is well worth reading. She indicates that too often we enter the educational arena attempting to change or improve situations through team effort when teachers don't know they are part of the team, and perhaps worse, have no idea what role or position to play in attempting to affect change. The person or persons seriously interested in intervention and planned follow up, interference, will not attempt to undertake this task alone or even with partial help and school support. Getting organized is a crucial step.

Soliciting, gaining support and the clarifying of roles and responsibility in the process of intervention is of paramount importance in the intervening process. Taking a cue again from Clabes, the staff must know that they are team members, team players, with specific responsibilities in both the intervention and interference process. Let us be mindful that organizing for change involves a wide range of people. We may well convince the kindergarten teacher or the award-winning remedial specialist that intervention pays off, yet other key people must take note and lend assistance.

It is assumed that in trying to affect change the special educator will involve, include and actively incorporate the school administrator. The principal should have access to a wide range of information that is supportive of the necessity and value of planned intervention. Information should be gathered that highlights and substantiates the rationale for early intervention. Most thinking school administrators realize, or remember from earlier college assignments, that early intervention is quite worth while;

useful from the standpoint of positive experience in early childhood and the relationship between these experiences and achievements in later life.

The work of Skeels and Dye (1939), Hunt (1961), Kirk (1965) and Skeels (1966), is indeed worthy of review in projecting or acquainting the administrator, teacher, parent, board or support committee that landmark pioneering has taken place with respect to intervention and its positive effect on children. The implication herein is simply that in attempting to gain support and respect for early school intervention be wise enough to use references, tools and proofs in addition to your conviction that your ideas and plans make sense. It is again emphasized that in attempting to initiate Intervention and "Artful" interference careful and thorough planning has to take place.

One must approach the right people, select the proper team and make sure the various participants know their role and place in the intervening process. Whether the team member is a Board member as an observer, parent as guardian, teacher as instructor or administrator as manager, each must know and understand his or her role. One must develop a positive and supportive relationship between regular and special education to successfully reduce failure through planned intervention.

We will, we believe, see and hear more about intervention, interference and closer interaction between regular and special education. This may hold especially true in our rural based schools due to financial constraints the shortage of specialists and increasing lawful implications in disputes about the special child. What goes around comes around. We may be finding ourselves more and more involved with regular teachers in sharing those responsibilities that Kirk (1941) alluded to in The Journal of Exceptional Children at that time. To quote Samuel......"the education of exceptional children is not wholly the responsibility of any one group of teachers. All educators and teachers have exceptional children under their care"... He went on to say, ..."it is hoped that in the future, all special class teachers will contribute their knowledge and special skill to the regular classroom teacher who has always had, and will always have, many minor forms of exceptional children in the classroom......"

Need we say more? It's time to do less "saying" and more "doing" in our rural schools. Intervention and Interfering, in an "Artful" way, is truly worth the effort.

ACRES RURAL SPIRIT

Table 1

Means and Standard Deviations

	1978		1979		1980		1981	
N =	66		69		68		87	
	$\overline{X}$	SD	$\overline{X}$	SD	$\overline{X}$	SD	$\overline{X}$	SD
Auditory Memory	7.94	3.89	9.90	2.22	10.69	1.81	9.83	2.43
Rhyming	9.44	5.02	8.23	3.82	8.84	3.55	10.09	2.81
Letter Recognition	6.39	2.10	10.39	1.57	10.69	.80	10.20	1.68
Visual Matching	10.58	4.19	12.77	1.80	12.91	1.24	12.43	1.94
School Language & Listening	6.44	1.82	12.10	2.09	12.68	1.80	12.52	2.18
Quantitative Language	5.21	1.75	9.94	10.54	9.13	1.74	8.98	1.78
Beginning Consonants	46.09	15.32	61.90	9.51	69.79	6.23	64.00	9.57
I.Q.	103.91	14.62	99.23	13.38	103.93	12.28	102.90	12.97

Table 2

Summary of Multivariate Analysis of Variance

	Multivariate			Univariate	
Source of Variation	df	ms	f	df	f
	21/804		23.26**		
Auditory Memory		91.2		3	12.78**
Rhyming		48.9		3	3.37*
Letter Recognition		276.7		3	106.89**
Visual Matching		78.4		3	12.55**
School Language & Listening		615.4		3	154.79**
Quantitative Language		300.1		3	10.42**
Beginning Consonants		5309.4		3	47.65**
Within Groups					
Auditory Memory		7.14			
Rhyming		14.51			
Letter Recognition		2.59			
Visual Matching		6.25			
School Language & Listening		3.98			
Quantitative Language		28.79			
Beginning Consonants		111.42			

*$p < .05$
**$p < .0001$

Table 3

Post-hoc Scheffé Comparisons of Means

Dependent Variable	Comparisons	Significant Differences	S
Auditory Memory	1978 VS 1980	2.8	2.64
	1978 VS 1981	1.9	1.23
	1979 VS 1980	1.8	1.28
Rhyming	1979 VS 1981	1.9	1.71
Letter Recognition	1978 VS 1979	4.0	.78
	1978 VS 1980	4.3	.78
	1978 VS 1981	3.8	.74
Visual Matching	1978 VS 1979	2.2	1.20
	1978 VS 1980	2.3	1.21
	1978 VS 1981	1.8	1.14
School Language & Listening	1978 VS 1979	5.7	.97
	1978 VS 1980	6.3	.97
	1978 VS 1981	6.1	.91
Quantitative Language	1978 VS 1979	4.7	2.60
	1978 VS 1980	3.9	2.60
	1978 VS 1981	3.8	2.46
Beginning Consonants	1978 VS 1979	15.8	5.11
	1978 VS 1980	18.7	5.12
	1978 VS 1981	17.9	8.34

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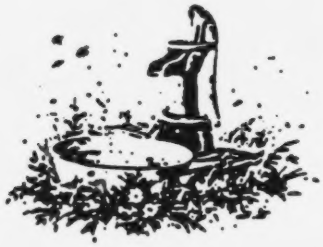


CONCURRENT SESSIONS

WEDNESDAY, MARCH 18, 1987

4:00 - 5:00 PM

Brent C. Mangus, Ed.D.
University of Nevada, Las Vegas
School of H P E R
Las Vegas, NV 89154

SPECIAL PHYSICAL EDUCATION FOR RURAL NEVADA SCHOOLS

In the late 1970's a group of people took a traveling adapted physical education workshop to various rural schools in Nevada in an attempt to inservice the special and physical education teachers working with the special education child in physical education. Later, in the early 1980's the state of Nevada mandated that new teachers providing adapted physical education to students attending public schools have a minimum of 9 semester hours of training at the university level in adapted physical education. These providers must also be certified to teach physical education, which requires at a minimum, a bachelors degree in physical education. With the state mandate effective March of 1984, many teachers are returning to the university to attend the required courses. However, the geographical distance which separates many of the towns and public schools in Nevada has reduced the availability of the university to the rural physical education teachers.

Many of the physical education teachers in these rural schools have been in the rural school for over 10 years and have not had the opportunity to take coursework in teaching the special education child. Other teachers who are teaching physical education to the special education child are special education teachers who have little or no training in physical education.

For those teachers working in a rural setting who fit into one of these categories the following information sharing model was developed at the University of Nevada, Las Vegas. The information sharing was proposed to assist those teachers to enhance the adapted physical education program at their school and especially not to tell them what they were doing wrong.

Initially, a number of schools were contacted and wanted to participate in this information sharing program, however, the university faculty and staff involved were limited and started the program with three schools with the intention of expanding. The program started with one University of Nevada Las Vegas (UNLV) faculty member and two graduate students visiting the participating schools. Introductions of staff and observations of programs were made. The rural school personnel and UNLV people then sat down together to determine the specific objectives of this project for the rural school.

Project Objectives

The main objective in this project was developed as a broadly defined objective based on the needs of the rural physical education teachers at this initial meeting at the rural school. To attain this main objective there needed to be a number of sub-objectives which in turn would contribute to the attainment of the main objective.

The main and sub-objectives were:

1. Provide adapted physical education training (no university credit earned) to rural Nevada physical education teachers. This training is to be completed at the teacher's home school through direct consultation, telephone consultation, and through information mailed to the rural school teacher. Training will be completed in the following:

1.1 Techniques of child screening in regular physical education classes. This will assist the adapted physical educator in determining those students who would benefit from further testing and special programming.

1.2 Assessment of motor and fitness delays through appropriate evaluation tools e.g. Brunicks-Oseretsky and the AAHPERD Physical Fitness Test.

1.3 Teachers will be assisted in developing appropriate goals, objectives, and activities for those students determined to need the extra help. Elementary, middle, and high school students all have various and individual needs which require curriculum to be developed emphasizing their strengths and helping their weaknesses.

1.4 Program implementation and evaluation will be done on a collaboration basis. Collaboration of techniques for implementation of the designed program will make implementation as efficient as possible. The program evaluation will be completed by both parties with the results utilized to determine where changes can be made to enhance the entire teacher training process from screening to implementation.

Starting the Project

The initial visitation to the rural schools was made by the university personnel consisting of the author and two Masters-level graduate students. This visitation was scheduled over the telephone after the proper school district authorities were contacted. The entire program was explained, and the authorization to proceed was given. This initial visitation was well received by both parties. The university personnel observed the current adapted physical education classes, one regular physical education class with handicapped students "mainstreamed," along with a regular physical education class containing no handicapped students.

The university and rural school personnel then had a meeting to discuss IEP's of individual students and the overall school programming requirements. Copies of pertinent materials such as school or district policies were made for the university personnel to take with them. Any special requests for the enhancement of the overall program were discussed at this meeting. The development of project objectives at this time was important so that both parties were aware of the objectives and attempted to stay as close as possible to these objectives over the course of their interaction.

At the conclusion of this meeting the graduate students from the university began to formulate a plan to accomplish the objectives outlined. The ride back to the university can be very productive in this situation as the graduate students can begin to formulate their ideas with input from the university professor. The graduate students then formalized their plans in the next few days and discussed this formalized plan with the university professor before returning to the rural school site.

Upon their return to the school site, the graduate students' initial recommendation to the teachers was to make a formal evaluation and assessment. The rural school students who had been served in an adapted physical education setting prior to this time had not been formally evaluated. The rural school physical education teacher thought they were "slower" than the regular students and so assigned them to adapted physical education class. This was the case in all of the schools we visited.

The evaluation tool recommended and implemented was the Bruininks-Oseretsky Test of Motor Proficiency for the students in the elementary and some students in the middle school. The Bruininks-Oseretsky test was somewhat difficult for the rural physical educator to administer initially. The graduate student responsible for the elementary and middle schools went to the school to demonstrate the test procedures to the teacher and clarify any questions. After the demonstration, there was no recurrence of the difficulty in administering the test as in the initial attempts.

For the high school age students the recommended evaluation tool was the AAHPERD fitness test. This was accepted and implemented easily by the high school physical education teachers.

After the evaluation and assessment were completed, it was mutually agreed between the rural school personnel and the university personnel that each student qualifying for adapted physical education would benefit from some special programming in addition to the regular P.E. activities the teacher planned. Entire classes could participate in an activity with various students receiving individualized benefits. Activities can be conducted with specific objectives for individual students being delineated for that activity. For example, a kickball game can be played, and the teacher can have the class members practice various forms of static balance as the game is played. This will give that student needing that little extra practice to play along with the class and still get some extra help.

Skill Development Activities

Each situation will require individualized attention and planning. In the Nevada rural adapted physical education project there were a number or recommended activities to enhance each student's physical education skills. Some of the common suggested activities to enhance physical education skills of elementary and some middle school students include beginning with balance and ball skills.

A properly planned activity utilizing balance skills should follow a task analysis progression. The student is placed in the progression at their functioning level. The following is an outline of a balance progression.

1 - Static balance

- 1a - balance on two feet, eyes open, arms out to the sides
- 1b - balance on two feet, eyes open, arms down
- 1c - balance on two feet, eyes closed, arms out to the sides
- 1d - balance on two feet, eyes closed, arms down
- 1e - balance on one foot, eyes open, arms out to the sides
- 1f - balance on one foot, eyes open, arms down
- 1g - balance on one foot, eyes closed, arms out to the sides
- 1h - balance on one foot, eyes closed, arms down

All positions should be held for a minimum of six seconds.

2 - Dynamic balance

- 2a - student walks down between lines 6 inches apart marked on the floor
- 2b - student walks down between lines 4 inches apart marked on the floor
- 2c - student walks forward and backward on line marked on floor
- 2d - student walks forward and backward on 2 x 6 board placed on floor
- 2e - student walks forward and backward on 2 x 4 board placed on floor
- 2f - student slides sideways on 2 x 4 board raised 2 inches off the ground
- 2g - student walks forward and backward on 2 x 4 board raised 2 inches off the ground
- 2h - student walks forward looking straight ahead on 2 x 4 board raised 2 inches off the ground

The walking distance in each step of the dynamic balance progression should be a minimum of 10 feet. Shorter distances are acceptable, however, not as much practice is obtained by the student.

The ball skill progression should also follow a task analyzed basis and individual students placed in the progression at their functioning level. The following, an outline of the ball skill progression, is mainly a set of guidelines for the practitioner.

- 1 - Rolling with two hands
- 1a - Rolling with one hand
- 2 - Underhand throw with two hands
- 2a - Underhand throw with one hand
- 3 - Chest pass
- 4 - Two-hand bounce pass
- 5 - One-hand bounce pass
- 6 - Two-hand overhead pass
- 7 - One-hand "baseball throw" type pass
- 8 - Bouncing ball with two hands
- 8a - Bouncing ball with one hand
- 9 - Bouncing ball with two hands while walking
- 9a - Bouncing ball with one hand while walking

10 - Throwing for accuracy
10a - Throwing for distance

The steps outlined are only a beginning of the complete task analysis for ball skills. There are numerous sub-tasks for each step mentioned, however, for the purposes of this paper only the major steps have been outlined. Some teaching suggestions may also benefit the teacher implementing the ball skill progression. A few suggestions include:

1 - Beginners learning to throw should only throw short distances.
2 - Use a sponge ball, fleece ball, or other soft ball during early introduction to throwing to enhance learners' comfort with the ball.
3 - Throwers should use opposites i.e. left foot-right hand, etc.
4 - Teach introductory ball skills in a multipurpose room, so that retrieval of balls will be easy.
5 - Emphasize finger tip control.

For the remainder of the middle school students and the high school students individualized programming is important. Recommendations for this age student can include a daily fitness component in addition to the regular class exercises, and a modification of some of the activities, so that the handicapped students could more easily participate in the regular class activities.

The extra daily fitness component has the handicapped students pair up with each other and do an individualized amount of run-walk. The students run for a specific time or distance, or as far as they can, then walk for a specified distance and repeat the run-walk procedure. This run-walk regime is completed on either a total time or total distance calculation made on an individual basis. This run-walk along with push-ups, curl-ups, and explosion jumps (jumping as high as you can 10 times) can be helpful in increasing the fitness level of the handicapped student. An increased fitness level can assist the handicapped student in participating with the regular students in a physical education class.

Because at the middle and high school level many of the handicapped students are mainstreamed into the regular class, a good idea is to modify some of the activities to allow the handicapped student to practice participating in a modified regular class activity. Any activity can be modified with just a little ingenuity on the part of the teacher. However, for those who need some help to start, the following suggestions may give some ideas for the modification of a volleyball game. Remember, that not all of the students have to participate in this manner; maybe the teacher will set up one game out of four in a modified version and have all of the students with low level skills playing on the modified court. Some teachers prefer to have a modified court and rotate some of the handicapped students in and out of that game to reduce the stigma of the "learners court losers."

1 - Don't begin by using a volleyball; start with a beach ball. A beach ball travels much slower, doesn't hurt the hands, and is much easier to visually track.

2 - Reduce the height of the net and the size of the playing court. Some students are just not strong enough to hit the ball as far as is required on a full size court.

3 - Allow as many hits as necessary to get the ball over the net. Eliminate the three-hit rule and maybe let the ball bounce once on each side.

4 - Mark off the spaces so that each student has a particular area to control and one student does not run all over the court.

5 - Allow more than six players per side, eight or ten players can play on each side at one time. This may cause some congestion, but will also get more students participating.

6 - Designate one court for practice and have students just practice serving, or setting, or volleys, etc. This will let the teacher spend more time with individual students in a group setting.

These ideas are by no means exhaustive; many other modifications can be made based on the facilities, students, and the needs of the teacher. This is not the only game that can be modified. Any game can be modified - just try.

Follow-up by graduate students

After the recommendations had been made by the graduate students to the rural school teachers, which was at the rural school site, the graduate students used a weekly follow-up. This follow-up was completed by telephone call. Just talking to the rural school teacher once a week about progress or needs was very helpful to fortify the relationship between the "University" and the rural school teacher. Many times hearing that there was progress in the rural school helped the graduate student feel as though they were doing a service. For the rural teacher to hear that they were doing the correct thing and to keep going was reinforcing to them. At various times test results or new ideas for activities were mailed to one or the other site.

If you are discussing something on the telephone, it is helpful to have a copy of the document so that both parties are in complete understanding of what is being discussed. The graduate students were required to visit the rural school site a minimum of once a month, yet there were times the rural sites were visited three or four times a month because of the enjoyment both parties received from working together.

Summary

A need was seen in the state of Nevada for assistance to rural physical education teachers providing services to handicapped students. Personnel from the University of Nevada, Las Vegas had the opportunity to provide adapted physical education assistance to a few rural Nevada schools. The program initially started with three schools and the intention to expand and include more schools and teachers if the program was deemed valuable. This determination has not been officially made.

Both the university personnel and the rural school teachers have learned a great deal from this experience. The graduate students involved in this program have learned a great deal about setting up and implementing an adapted physical education program in a rural setting. Such things as program evaluation, evaluation of students, and implementing activities can be the same in rural and urban settings. The graduate students in this project had the opportunity to help with all of these things during the course of this project. The rural school teachers received some input on how to assist the handicapped student in the physical education class. This information was presented in such a way that it was willingly accepted and implemented. The rural school teachers have been happy with the results of the information sharing program and the effect it has had on the rural school student.

The objectives of the project have been kept in mind, followed, and many have been achieved. This is not to say that there have not been problems associated with this project. For one, the communications in this project have not been free of problems. An example of a problem encountered in the communications during this project was when one of the graduate students had made an appointment over the telephone to make a site visit with one of the teachers. When the student arrived at the school, no one was in school that day. The rural teacher had forgotten that there was a local holiday planned for that day, and no school was held. The graduate student had to turn around and drive back home. This just demonstrates that a little expereience in the area of communication during this type of project can go a long way.

The participants in the project feel like this has been a very good experience for everyone involved. The teachers have expressed their satisfaction with the enhanced program the handicapped students are now receiving. Continuation and expansion of the program is intended.

Linda N. Drew-Youngblood, Ed.D.
Lander College
Greenwood, SC 29646

Doris F. Fitzgerald, Ed.D.
Lander College
Greenwood, SC 29646

Sharon Keesley, M.Ed.
P.O. Box 608
Edgefield, SC 29824

PROJECT SERCh (SPECIAL EDUCATION IN RURAL COUNTIES) MEETING THE NEEDS OF THE RURAL SCHOOL DISTRICTS IN SPECIAL EDUCATION IN WESTERN SOUTH CAROLINA

In spite of the fact that Public Law 94-142, "The Education for All Handicapped Children Act," is over ten years old, many rural school districts across the nation still have a shortage of teachers in special education. Rural districts in South Carolina are particularly hard-pressed to locate and hire enough qualified teachers for their classrooms. Often teachers with little or no traning, or training in another area, are hired under "emergency" teaching permits to fill positions.

Lander College, a college in the rural western region of South Carolina has identified these needs through the Greenwood Area Consortium. This consortium is comprised of the superintendent from each school district in a geographical area covering ten school districts. The superintendent then appoints a representative from his/her district to serve in a subgroup, the Staff Development Network, to further delineate and find ways to meet these needs. Lander College is a member of both the Consortium and the Network.

The purpose of this panel is to identify how the Consortium was formed and how it, together with the Network and Lander College, work to identify, plan, and implement to meet these needs. The objectives of the presentation are: (1) to share organizational procedures in identifying the needs of rural school districts in special education; (2) to identify and describe the method one college in teacher education utilizes to meet the needs of rural school districts in special education; and (3) to discuss the practical application of implementing similar consortia arrangements in other areas of the country.

Dr. Doris Fitzgerald will describe the organizational structure and process of the Greenwood Area Consortium and the history of its development. Mrs. Sharon Keesley will describe the interagency cooperation in identification of needs, planning, and implementation of the model for a rural school district. Dr. Linda Drew-Youngblood will describe the instructional procedures that were employed in the developed model. Handouts will be provided and transparencies will be utilized to enhance the presentation.

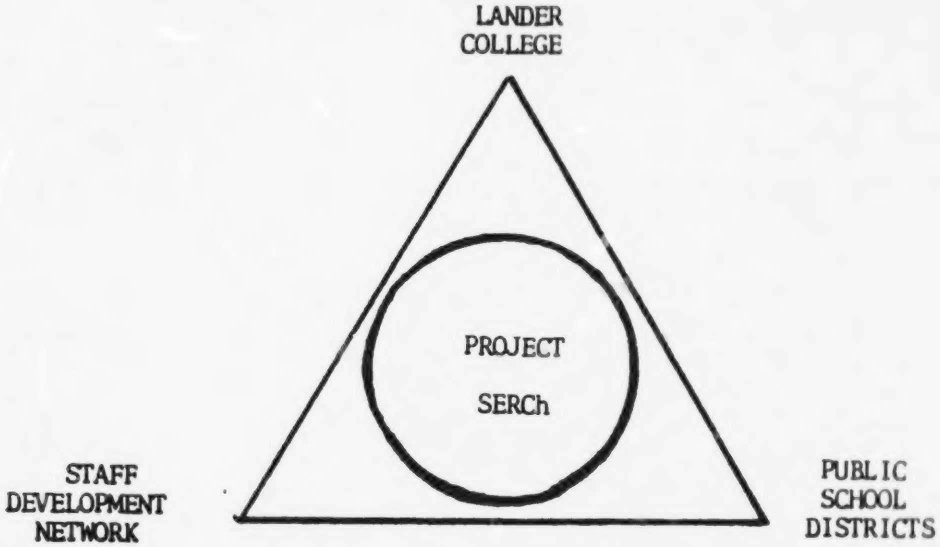
Linda N. Drew-Youngblood, Ed.D.
Associate Professor of Special Education
Lander College
Greenwood, SC

Doris F. Fitzgerald, Ed.D.
Director of Graduate Studies
Lander College
Greenwood, SC

Sharon W. Keesley, M.Ed.
Director of Instruction
Edgefield County Public Schools
P. O. Box 608
Edgefield, SC

PROJECT SERCh (SPECIAL EDUCATION IN RURAL COUNTIES)

MEETING THE NEEDS OF THE RURAL SCHOOL DISTRICTS IN SPECIAL EDUCATION IN WESTERN SOUTH CAROLINA


LANDER COLLEGE
PROJECT SERCh
STAFF DEVELOPMENT NETWORK
PUBLIC SCHOOL DISTRICTS

PROJECT SERCh (SPECIAL EDUCATION IN RURAL COUNTIES) MEETING THE NEEDS OF THE RURAL SCHOOL DISTRICTS IN SPECIAL EDUCATION IN WESTERN SOUTH CAROLINA

In spite of the fact that Public Law 92-142, "The Education for All Handicapped Children Act," is over ten years old, many rural school districts across the nation still have a shortage of teachers in special education. Rural districts in Western South Carolina are particularly hard-pressed to locate and hire enough qualified teachers for their classrooms. Often teachers with little or no training, or with training in another area, are hired with "emergency" teaching permits to fill positions.

Lander College, a state-supported college in rural Western South Carolina, assisted in identifying these needs through a consortium arrangement with the local school districts. This consortium, entitled the Greenwood Area Consortium, is composed of a superintendent from each of the ten member school districts in the surrounding area. The superintendent from each school district appointed a representative to the Staff Development Network, which operates under the aegis of the Consortium. This subgroup meets on a regularly scheduled basis to share common identified needs. Lander College has a representative to the Greenwood Area Consortium as well as a representative to the Staff Development Network. The President of Lander College, or his agent, the Vice President for Academic Affairs, is a member of the Greenwood Area Consortium. The Chairperson of the Division of Teacher Education is the Lander College representative to the Staff Development Network. Lander College was therefore in a unique position to provide assistance due to membership in both of these groups.

Once this consortium was fully developed and operational, then it was possible to assist in meeting the needs of the Staff Development Network. Each member of the Staff Development Network surveyed teachers in his/her school district in order to identify teacher needs. Information was gathered through various channels. One method for identifying needs was by surveying teachers through the office of the principals in each individual school within the district. In addition, directors of special education within each school district identified needs using a combination of methods. The directors assessed teacher needs through classroom observation, by review of teacher credentials, and teacher reported self-identified needs. Principals also identified needs through their varied interaction with classroom teachers. Examples would include formal and informal classroom observations, analysis of student achievement scores, and/or analysis of teacher skills.

Once a school district identified a specific need, that school district contracted with the Director of Graduate Studies at Lander College for the development of a graduate course(s) to meet these needs.

These courses were developed by one of the authors who serves as Associate Professor of Special Education. Enrollment procedures followed the routine established by the institution. Each course developed to meet these needs was offered for three semester hours graduate credit. The majority of these courses were taught on site in the school district which identified the particular need(s). This arrangement made these courses even more accessible and attractive for the teachers in the school districts. (In addition, school district administrators contracted with professors of special education on the Lander College faculty to meet identified needs through inservice workshops.)

The objectives for each course were determined at two levels. The global objectives were specified by the district representative in conjunction with the professor of the course. Specific objectives were determined within the framework of each course based upon teacher self-identified needs within his/her classroom. The population of the courses included special education teachers, regular classroom teachers, special education administrators, regular administrators, and school psychologists. Methodologies utilized in each of the courses were determined by professor diagnosis of individual teacher/administrator needs. Examples of each type of objective and activities utilized to achieve the objectives are attached.

The results of Project SERCh are on-going. As a result of the courses already offered, more teachers have been certified and/or re-certified in categorical areas of special education as mandated by the South Carolina State Department of Education and the Georgia State Department of Education. (Lander is located in a geographical area that is readily accessible to teachers in Georgia.) Courses have also been used for recertification purposes in regular education and administration. Follow-up interviews with teachers enrolled in these courses have documented the fact that the level of teacher classroom skills has been raised. Directors of special education have indicated that teacher use of appropriate methodology and supporting materials has both increased and improved. Parents of various handicapped children who were enrolled in the practicum component of these courses have indicated their awareness of the proper match of developed teacher skills and handicapped children need.

Based upon these experiences, the authors have concluded that Project SERCh was successful and is worthy of continued effort. Project SERCh has and will continue to be a vital and viable part of Lander College's continued service to the larger community.

This model lends itself to adaptation for any geographical area of the country. The public school personnel must first identify their unique needs. The likelihood is that these needs have been identified because of the emphasis on testing for accountability purposes. The process of establishing a consortium may be initiated by either the public schools or the institution of higher education. The next task is to match the delivery of services to meet the identified needs. It is at this point that the most flexibility and room for creativity is possible as each consortium arrangement is developed by the professionals in each entity. This type of project may be easily implemented in any locale and is highly recommended as a possible solution to the problem of teacher certification in special education and in meeting the needs of handicapped children in the public school classroom.

ATTACHMENT 1

GLOBAL OBJECTIVES

OBJECTIVE #1: The teacher will identify and apply steps in diagnostic/prescriptive teaching in the classroom with learning disabled children.

ACTIVITY: Teacher applied diagnostic/prescriptive teaching procedures in public school classrooms and/or college-designed summer practica for learning disabled students. Examples include administering diagnostic tests, analyzing results, writing I.E.P.'s, implementing procedures, formative and summative evaluations. Professor observation and evaluation of procedures was continuous throughout the course.

OBJECTIVE #2: The teacher will compare the dominant learning styles of learning disabled children and identify a variety of teaching methodologies for use in the classroom.

ACTIVITY: Teachers identified a variety of possible learning styles by administering a learning style inventory to each student and observation of student preferences. The teachers then utilized current research on learning styles in selecting teaching procedures appropriate for each learning style and each individual student.

OBJECTIVE #3: The teacher will identify and integrate appropriate classroom management techniques in the classroom with learning disabled students.

ACTIVITY: Teachers identified a variety of classroom management strategies which have been utilized with learning disabled students. Teachers then applied a variety of techniques in the classroom setting. Professor observation and charts of individual student progress were utilized to indicate success. Individual and group sessions with the teachers were utilized to discuss student progress, analyze records, and discuss recommendations for the future.

ATTACHMENT 2

SPECIFIC OBJECTIVES

OBJECTIVE #1: The teacher will prepare Individualized Educational Plans (I.E.P.) appropriate for his/her particular learning disabled student(s).

ACTIVITY: Teachers utilized current diagnostic information on individual learning disabled students to develop I.E.P.'s for implementation utilizing current literature on teaching strategies and classroom applications. Specific prescriptions for each student were determined. Teachers made periodic diagnoses of progress, charted individual student progress, and modified I.E.P.'s accordingly.

OBJECTIVE #2: The teacher will construct age-appropriate materials for use in their classrooms with learning disabled students.

ACTIVITY: Teachers constructed a variety of materials for use in their individual classrooms. The material construction was based on: (1) current literature concerning learning disabled students and material use; and (2) specific learning disability of individual students. Materials were field-tested in the classroom and modified for future use.

AGENDA

I. Introductory Remarks

II. Organizational Structure and Process (D. Fitzgerald)

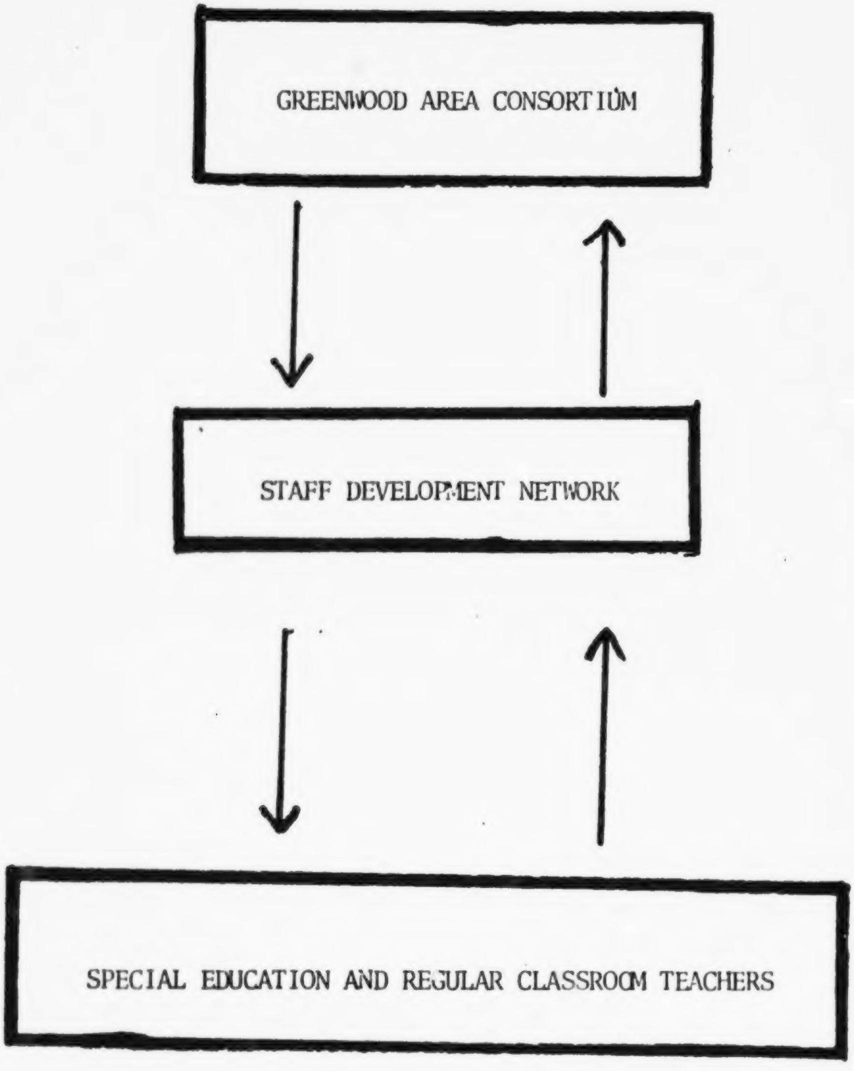
III. Identification of Needs in Rural School Districts (S. Keesley)

IV. Instructional Process (L. Drew-Youngblood)

V. Implications

VI. Summary

VII. Question and Answer Session


GREENWOOD AREA CONSORTIUM
STAFF DEVELOPMENT NETWORK
SPECIAL EDUCATION AND REGULAR CLASSROOM TEACHERS

MEMBERS OF THE GREENWOOD AREA CONSORTIUM

Abbeville County School District

Edgefield County School District

Greenwood School District #50

Greenwood School District #51

Greenwood School District #52

Lander College

Laurens County School District #55

Laurens County School District #56

McCormick County School District

Newberry County School District

Saluda County School District #1

DONIPHAN COUNTY EDUCATION COOPERATIVE #616
P.O. BOX 218 BENDENA, KS 66008 913-988-4204

Michael L. Bilderback, M.S., Director

PROFESSIONAL PLANNING TEAM MEETINGS

Have you ever attended a staffing and been embarrassed because of the lack of planning and preparation prior to the parents entering the conference room? Have you misplaced your grade book, achievement test scores, classroom observation form or the I.E.P.? Does the Speech Clinician agree with the Learning Disabilities teacher? Does your School Psychologist ever agree with anyone on the staffing committee? Perhaps I am beginning to get a bit carried away, but the fact remains-almost anything goes at a staffing meeting. Murphy's Law, "Anything that might go wrong-probably will" can and does all to often apply. Our agency has had its share of such moments, but we have overcome many weaknesses in this area through the the use of what we call the Professional Planning Team Conference.

We are now in our fifth year of use with this somewhat innovative yet simple approach to effective staffing meetings. Although personnel must make a extra effort nearly all realize that the assets outweigh the liabilities.

The essence of the P.P.T. (Professional Planning Team Meeting) is that all professional members of the staffing committee meet prior to the parent conference to review the students current status. Obviously, the course of conversation will very depending upon the reason for the meeting i.e. initial placement, annual review, comprehensive re-evaluation, suspension, etc. The time span also will vary from 15 minutes to 45 minutes with 30 minutes being the most common period of time for most P.P.T. meetings. Staffing with the parents immediately follows the P.P.T. meeting.

We have found that the following format helps to improve the quality of each students educational service needs:

a.) "re-orientates" all staff members (both regular education and special education) to all areas of daily performance, new test scores retrieved, health (follow-up) factors, behavioral profile data and amount and/or degree of "child change" since the last meeting, referral, I.E.P. renewal, etc., etc.,

b.) reduces the margin of error regarding any assumptions that might be silently made by staffing team members,

c.) maximizes the expertees of special education, regular education and administrations of both service providers instantly to persue problem solving solutions,

d.) expands team members to include: vocational coordinators, probation officers, social worker/counselor from mental health, etc.

e.) data temporarily misplaced can be located and used,

f.) reach *team* consensus regarding the recommendations that *we* feel are in the best interests of the student.

Each of the above points is worth further elaboration. *First*, the stronger the inter-agency communication the fewer the number of assumptions. Remember the old saying about the word ass/u/me (If you do so you'll make an *ass* out of *u* and *me*). *Second*, if you need to know something about the students school life its refreshing to know that you can ask that source simply by making eye contact and asking your question. Third, two heads is better than one and three is better than two. Teamwork will always pay more dividends than placing all the responsibility constantly on the shoulders of only one or two people. If your teams are not good at problem solving then they'd better start spending more time practicing on this vital skill. Problem solving is an instructional survival skills. *Fourth*, community service providers simply enrich *your* service opportunities for success. Their input is sometimes of more value than your own. *Fifth*, its easy to misplace something important. We've all done it. Typically one can find what's temporarily missing if they have the time to look for it. *Sixth*, life is a series of choices. We have the responsibility and the professional obligation to assist parents develop, define, and impliment the best possible choices. Last, yet vitally important, our staff never sets down to discuss student recommendations without reaching a compromise on what those recommendations will be. An anology might help to explain this premise. If you're lying in a hospital bed wondering whats going to take place tomorrow and in walks your doctors arguing between themselves about whether or not you need surgery, my guess is that before long you're going to begin to worry and then question if any of them are right. Such diversity in thought and opinion in the field of medicine is no better medicine in the field of education. Although we all have a right to our opinion and can state it freely at the P.P.T. we must have compassion for both the student and the student's parents. *Compromise is essential*.

In addition to the ingrediants heretofore mentioned we like to present graphs and charts to P.P.T. members and to the parents. We do this because some people are more visually orientated than auditorially inclined. If only one parent attends they have the chart/graphs to show their spouse and/or siblings. The degree of child change in instances of annual reviews and 3 year re-evaluations seems to make a better impression upon parents if and when charts and graphs are used. (Copies enclosed, Appendix B)

Finally, once the P.P.T. is concluded and the staffing meeting with the parents has taken place we apply one final extra effort. We write a staffing report. This report defines who was present and not present at the meeting. When and where the meeting was held and what the highlights of the meeting were. Recommendations, parent comments and preferred choices of recommendations made, etc. are recorded. The report is then typed and disseminated to all partys (whether present of not). This preserves the core of the meeting and provides all parties with a two-way communication vehicle. It is two-way in the sense that a coverletter introducing the staffing report clearly indicates that if they do not agree with its content that they can reply in writing. Such comments will be reviewed for further clarification and rewritten if necessary. (Copies enclosed, Appendix, B)

Our comprehensive review of the students current status not only keeps us on our toes it also keeps us on task. Our meetings have substance and air the degree of professionalism respectable to our standards. The quality of primary services and ancillary services to our students has been enhanced through this simple yet highly effective set of inter-agency procedures.

A valid footnote to the staffing report concept is related to a recent decision by O.S.E.P. Blades (EHA 1986), P. 211:408 which states, "The parents can, however, tape-record the (I.E.P.) meeting." Please refer to appendix A for details and highlights.

APPENDIX A

Parents may tape-record IEP meetings, OSEP says

When may a representative accompany a parent to a school meeting? How can parents ensure that they receive full documentation of what happens at school meetings? OSEP has recently told an Alabama parent representative that parents may bring a person familiar with applicable special education laws and the child's needs to an IEP meeting, but cannot insist that the district furnish a person to take notes during the meeting. The parents or district can, however, tape-record the meeting. Blades (EHA 1986) P. 211:408.

The situation giving rise to these questions involved a school district's practice of barring parent representatives from certain school meetings and accompanying the parent during classroom observations. OSEP pointed out that there are no federal requirements or guidelines for conducting meetings other than IEP meetings. Nor does federal law specify who can accompany parents during classroom observations. However, OSEP stated, a handicapped child's parent my bring a person who is familiar with applicable laws and child's needs to an IEP meeting. In fact, OSEP recommends that a school inform a parent of the right to bring other participants to the meeting. See question 28 of the department of education policy interpretation of IEP requirements, 1 EHLR Dec. 103:52. OSEP advised the parent representative to look to state procedural requirements to determine whether representatives could attend other school meetings involving the handicapped child or accompany the parent during classroom visit.

The parent representative also requested advice on how to obtain accurate records of school meetings. Although the LEA has permitted parents to tape-record meetings, the representative pointed out that at times a committee member would object to the use of the recorder. Leaving the parent or representative no alternative but to try to take notes. Thus impeding the ability to participate in a meaningful manner. She also noted that without the tapes or notes, there would be no documentation for the parent to rely on in the event a hearing is requested. OSEP replied that although a school district is not required by federal law to provide an individual to take notes during IEP meetings, taping the meeting is permissible at the option of either the parents or the local education agency.

Commentary . . .OSEP issued a similar policy interpretation in 1979, see 2 EHLR Dec: 211:141. There, OSEP stated that it did not have the authority under existing regulations to either require or prohibit the use of tape recorders in IEP meetings. It added, however, that in those instances where a request is made to use a recorder in a meeting, there would be little gained by denying the request. It also noted that if a recording is made or used by school officals, the recording would be subject to the confidentiality requirements of both P.L. 94-142 and the Family Educational Rights and Privacy Act(FERPA). This same view can be found in OSEP's response to question 12 in its IEP policy interpretations, 1 EHLR Dec. 103:48.

APPENDIX B

1. Staffing Notification
2. Assessment Charts/Graphs
3. Staffing Report
    - a.) Cover Letter
    - b.) Staffing Report Letter

DONIPHAN COUNTY EDUCATION COOPERATIVE #616
P.O. BOX 218 BENDENA, KS 66008 913-988-4204

Dear____________________________,

Enclosed is a copy of the Staffing Notification sent out for the staffing which has been scheduled for____________________________ concerning your child,_____________________.

If this is an inconvenient date and time and you cannot make this staffing, please notify me at the above number. If I have not heard from you by ____________________________, I will assume the date and time are satisfactory and you will be present at the staffing.

STAFFING NOTIFICATION

STUDENT ______________________ DATE ______________________

Persons Notified: ______________________________

SCHOOL PERSONNEL:

Date of Professional Planning Team (PPT) Conference: ______________________

Place of Professional Planning Team (PPT) Conference: ______________________

Time of Professional Planning Team (PPT) Conference: ______________________

PARENTS:

Date of Staffing: ______________________

Place of Staffing: ______________________

Time of Staffing: ______________________

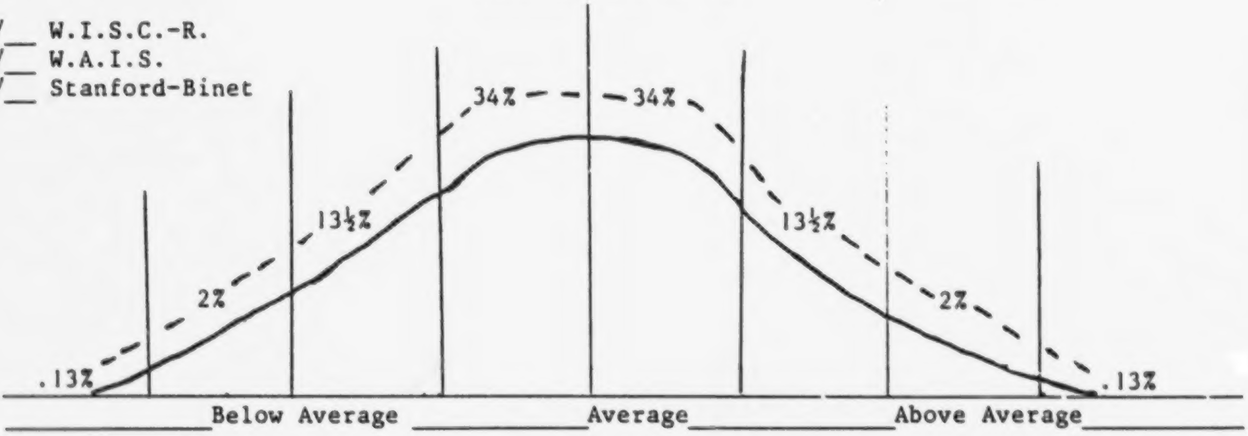
Reason(s) for Staffing: ______________________

Convener of Staffing ______________________

To Persons Notified: If you know of other persons having information applicable to this child's education, please inform them of this meeting. If you are unable to attend, please provide relevant writing information to the convener of this staffing.

Administered

__/__/__ W.I.S.C.-R.
__/__/__ W.A.I.S.
__/__/__ Stanford-Binet



Students Name:____________________

D.O.B. __________ Age: ________

Conference Date: ______________

School Psychologist: ______________

Donipan County Education Cooperative

#616

Michael L. Bilderback, Director
P.O. Box 218
Bendena, KS 66008
913-988-4204

WOODCOCK JOHNSON PSYCHO-EDUCATIONAL BATTERY

GRADE LEVEL PLACEMENT (SKILLS)

	Skills	Skills	Written Language Skills	General Information Skills	Total, Test Average
13.5					
13.0					
12.5					
12.0					
11.5					
11.0					
10.5					
10.0					
9.5					
9.0					
8.5					
8.0					
7.5					
7.0					
6.5					
6.0					
5.5					
5.0					
4.5					
4.0					
3.5					
3.0					
2.5					
2.0					
1.5					
1.0					
0.5					
K					

STUDENT'S NAME: ______________________

DATE TESTED: ______________

CHRONOLOGICAL AGE: ______________

TEST RESULTS
WECHSLER INTELLIGENCE SCALE FOR CHILDREN-REVISED

Age Equivalen

SUBTESTS: VERBAL

1. INFORMATION: Subject answers questions calling for general information. Score reflects exposure to, interest in, and ability to recall items from background of information to which subject has been exposed at home and at school.

2. SIMILARITIES: Subject identifies common elements in two items. Score reflects ability to generalize, do categorical thinking and handle abstract verbal reasoning tasks.

3. ARITHMETIC: Subject mentally solves orally presented arithmetic problems. Score reflects power of concentration and ability to perform numerical reasoning tasks.

4. VOCABULARY: Subject tells the meaning of words. Score reflects language background and general verbal ability

5. COMPREHENSION: Subject answers common sense questions. Score reflects self-direction and ability to use practical judgment when dealing with everyday problem solving tasks.

SUBTESTS: PERFORMANCE

6. PICTURE COMPLETION: Subject identifies most important missing part from incompleted pictures. Score reflects visual alertness, awareness of detail and power of observation.

7. PICTURE ARRANGEMENT: Subject arranges a series of pictures into proper sequence in order to tell a story. Score reflects ability to grasp sequence, anticipate and do social planning.

8. BLOCK DESIGN: Subject arranges colored blocks to match printed designs. Score reflects ability to be versatile in non-verbal problem solving, concept formation and ability to deal with spacial relationships.

9. OBJECT ASSEMBLY: Subject arranges pieces of jigsaw puzzles of familiar objects. Score reflects ability to use constructive imagination and visualization skills.

10. CODING: Subject associates certain symbols with certain other symbols. Score reflects associative learning, visual-motor speed and coordination and ability to maintain a sustained effort.

OPTIONAL SUBTESTS:

11. DIGIT SPAN: Subject repeats from memory numbers given orally forward and backward. Score reflects span of attention and immediate auditory recall.

12. MAZES: Subject traces an error free route through increasingly complex mazes. Score reflects planning ability, visualization of a path to a designated goal.

	Very Low 1	Low 5	Average 10	High 15	Very High 20
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

VERBAL IQ__________

PERFORMANCE IQ__________

FULL SCALE IQ__________

NAME__________

DATE__________ CA__________

MEAN TEST AGE:__________

PERCENTILE RANK:__________

95% level of confidence range: If this child took this test 100 times, 95 of these times his score would fall in this range.

DONIPHAN COUNTY EDUCATION COOPERATIVE #616
P.O. BOX 218 BENDENA, KS 66008 913 988 4204

Michael L. Bilderback, M.S., Director

Dear

Enclosed is a copy of the Staffing Report written on the staffing which was held at which you (were) (were not) present. This copy is for your reference. If you have any questions or concerns, please feel free to contact the office at the above number.

If you feel that this report is not an accurate summary of the meeting feel free to respond in writing to the D.C.E.C. office. Your written remarks will then be attached to the staffing report.

Thank you.

Sincerely,

U.S.D. #406 **Wathena**
U.S.D. #425 **Highland**
U.S.D. #429 **Troy**
U.S.D. #433 **Midway**
U.S.D. #486 **Elwood**

STAFFING REPORT

STUDENT______________________________ DATE________________________________

Persons in Attendance______________________________________

Reason(s) for Staffing:

Summary and Recommendations: (Be specific and include person(s) responsible.)

Person Filing This Report:____

The Learning Disabled Gifted Child:
Educational Procedures in Rural Settings

Kay Sather Bull - Oklahoma State University

ABSTRACT

This paper focuses on applications of cognitive-field theory to the education of the child who is both gifted and learning disabled. Specific applications and modifications for both regular and special education teachers in rural and remote settings will be examined. A brief review of the criteria for selection for both programs will be provided along with a critique of the inherent problems in selection. The problem of the hidden LD/GT will be examined in relation to identification in the rural school and the results or outcomes of being identified or hidden will be examined. The concept of conflict in identification and education will be examined and methods of dealing with conflict will be explored. Characteristics of GT/LDs will be explored in the context of how these should be dealt with in a rural setting.

One of the underlying assumptions of cognitive-field theory is education must be personalized. The assumptions and elements of a personalized program and the ways in which this kind of a program can be developed in rural schools will be presented. An adaption of a model for intervention (modified from Adelman & Taylor, 1986) will be presented which shows how LD/GT students should be provided access to the least restricted environment. Specific examples of techniques for education will be provided in the areas of motivation, information acquisition and output, and decision-making.

Dr. John Vokurka, Director
Diagnostic Network Coordination Center
Western Kentucky University
Bowling Green, KY 42101

Phyllis Schnacke, CSD
Diagnostic Network Coordination Center
Western Kentucky University
Bowling Green, KY 42101

Marrowbone, Summershade, Sweeden and Beyond: A Multidisciplinary Team Approach to Assessment in Rural Settings

Background

The Diagnostic Network Coordination Center (DNCC) was initially established for and continues to provide services, both direct and indirect, to handicapped children whose needs are so uncommon that assessment at either the local school district level or in joint agreement with other districts is either inadequate or impractical. Services have been designed and implemented to provide specified school districts, at no cost, with the necessary personnel, training and equipment to facilitate assessment, evaluation, support services, and program implementation for these children and youth.

The diversity among the school districts and the availability of qualified personnel to provide services has resulted in a variance in the types of children who are considered to be in need of services. Included are those who are classified as severe/profound, trainable mentally handicapped, hearing and visually impaired, multiply handicapped, emotionally disturbed, educable mentally handicapped, learning disabled, and speech and language disordered.

The success of the Diagnostic Network Coordination Center is based upon the collaborative efforts of the Kentucky Office of Education for Exceptional Children, Western Kentucky University, local school districts and service agencies. Seventeen school districts in a thirteen county area of rural South Central Kentucky have been identified and selected to receive the services of a multidisciplinary diagnostic network. These districts are located away from any major population center and subsequent services normally available. The DNCC is housed at Western Kentucky University in Bowling Green, Kentucky, a city of approximately 45,000.

The DNCC serves school districts which are within only a few miles of the center itself as well as those which are located as far as 100 miles from the Center. Within each school district the location of specific schools will vary considerably.

Multidisciplinary Team Approach

This multidisciplinary team approach is designed to provide a comprehensive diagnostic and support system for handicapped children and youth in rural school districts. It is believed that without such a service delivery model that handicapped children and youth residing in rural South Central Kentucky as well as those in other geographic areas would only, with great difficulty, receive appropriate assessment and subsequently appropriate educational and related services as mandated by law. Although not a panacea in and of itself this model has been operational for a period of seven years and has proven to be a functional alternative for local school districts.

In implementing the multidisciplinary approach to assessment both Federal regulations (300.532) and specific state regulations *must* be followed. Multidisciplinary or transdisciplinary assessment denotes those evaluation procedures which *simultaneously* attempt to assess the child's global performance. An important requirement of such an approach is communication between the participating team members. The communication process inherent to effective decision making includes but is not limited to the following:

1. A common perception of the problem.
2. An orderly way of approaching the problem(s).
3. A means of addressing the most significant problem(s).
4. A consistent rather than piecemeal approach.

Composition of a Multidisciplinary Team

The multidisciplinary team of the DNCC consists of individuals whose expertise includes but is not limited to speech and language, elementary education, special education, counseling, psychometrics, and school psychology. As a rule, one individual, the school psychologist completes intellectual, psychological, adaptive behavior and related assessments. The speech pathologist completes assessments of receptive and expressive language, auditory processing, articulation, voice and fluency, and oral peripheral examinations as well as hearing screenings. The educational assessment coordinators complete educational assessments including reading, mathematics, spelling, written languge, knowledge, readiness and early development. The family coordinator completes parent interviews, social and developmental histories and adaptive behavior assessment with the parent acting as the informant. The family coordinator is also responsible for securing parental releases to obtain records and sending for those records.

Vocational assessments are completed with children 13 and older when appropriate. The family coordinator who has experience in this area is responsible for these vocational assessments. Staff members share responsibility for activities such as review of school records, teacher interview, classroom behavior observations and vision screenings.

For those children who need additional services beyond the expertise of the DNCC staff, consultants are contracted with and engaged on a case by case basis. These consultants include a physical therapist, an occupational therapist, a low vision consultant, and an educator of the deaf. These consultants evaluate the child and their findings are included as a part of the multidisciplinary report from the DNCC.

The DNCC does not have included in its services any type of medical evaluation. In the case that medical evaluation is needed a referral is made for appropriate services.

DNCC Assessment Process

The DNCC Assessment Process consists of eleven distinct yet overlapping levels. The levels are listed below and are followed by a brief (discussion).

Level 1	Referral
Level 2	Prestaffing
Level 3	Information Gathering
Level 4	Screenings/Observations
Level 5	Formal Assessment
Level 6	Summarize data / initial report writing
Level 7	Staffing / Conclusions / Recommendations
Level 8	School Personnel and Parents Receive Final Written Report
Level 9	Attendance at SBARC meeting
Level 10	Placement / Programming (special or regular education)
Level 11	Follow-up

The DNCC accepts referrals through the participating school districts. Referrals may be initiated by the parent, school or an agency which works with the child. Regardless of the source, the referral is submitted to the DNCC by the special education coordinator of the school district. The DNCC staff is not involved in the prereferral process or in the initial SBARC meeting where the decision to refer the child is made. Referrals are mailed to the DNCC and are put on a waiting list. Initial assessments and children needing placement are given priority if a specific need exists otherwise referrals are taken on a first come basis.

A crisis referral has also been developed to provide immediate assessment for those children needing immediate attention. Assessment for these children is completed within a two week period. Certain criteria have been established for the case to be listed as a crisis. The most important criteria is that the child has been in his/her present placement no more than six weeks. Other criteria include lack of other assessment data and a willingness of the school system to transport the child to the DNCC.

Prestaffing is the process of familiarizing the staff with the referred child. Based on the information in the referral, staff members decide what other information is needed, who needs to see the child and what test instruments may be needed. A case manager, responsible for coordinating the reporting process, is assigned for the child.

Additional information needed before assessment can be completed is gathered by the staff. This information may include medical records, school records, other test information and teacher/parent interviews.

Screenings and observations include sensory (vision and hearing) screenings as well as classroom observations. These responsibilities are shared by all staff members. Although not a formal step in the process, staff members share information with the rest of the team at any point that this information may be helpful in the assessment process.

Formal assessment is completed by three or four staff members. Whenever possible assessment takes place at the child's school or home if the child is not enrolled in school. This process includes a complete psychological, educational, speech and language and adaptive behavior assessment. Included in the process are observations and social and developmental histories. If additional services are needed consultants as described previously are utilized.

At level six each staff member completes scoring and interpretation of test results and observations. At this time separate reports are written for each major area of assessment (e.g., educational).

After each staff member has written their individual reports a staffing is held. At the staffing each staff member formally reports their results and impressions. The case manager conducts the staffing and has major responsibility for writing the conclusions of the total report. Each staff member contributes recommendations for programming. Included in the conclusions are recommendations for appropriate placement. The case manager then combines the report and submits it to the secretary for typing.

After typing, proofing, copying, and signatures are obtained, the secretary mails one copy of the report to the special education coordinator in the local school district and a copy to the child's parent. The parent receives the same report as the school system although the report may be lengthy and not necessarily clear to them. The reason this is done is because DNCC staff feel that the parent has a right to have the same information the school has. Accompanying both copies of the test report are feedback sheets to be sent back to the DNCC. The school feedback sheet is an evaluation type instrument. However, the parent sheet is designed to find out whether the parent understood the test report and if they need further services.

Invitations to attend SBARC meetings must be made by either the school or parent before staff members can attend. Some school districts always invite the staff while others seldom do so. When an SBARC invitation is made at least one staff member attends the meeting if at all possible (only one occasion has arisen in the past 2 years that no staff member could attend and the school district did not wish to change the meeting time).

At the SBARC meeting the SBARC committee makes decisions regarding placement and programming. The DNCC report provides the needed diagnostic information as well as specific recommendations while additional information is available from other SBARC members.

Approximately two weeks to one month after the test report has been mailed, the case manager calls the school district and the parent to obtain information regarding the test report, the SBARC (if not in attendance) and any additional services needed. For parents who have no telephone a letter is sent and they are asked to call the DNCC if they wish to discuss the report or have further needs.

Interagency Collaboration

Interagency collaboration in rural settings requires a commitment from participating school districts if the multidisciplinary team model and process presented are to function. This is especially true when one considers the autonomy and possessiveness which is found to exist among a hetergeneous group of school districts, each with its own heritage, political-social characteristics and problems. From the inception of the DNCC a relationship within and between school districts has been carefully nurtured. The result of this effort has been a collective group of individuals working together and sharing resources including cooperative arrangements so as to appropriately provide for the needs of identified handicapped children and youth.

This process began with the identification of school districts willing to enter into a cooperative relationship. Once the school districts were identified and selected the individual responsible for administering the special education service delivery system within each district was designated to participate as a member of an advisory board which is responsible for providing input regarding the overall functioning of the DNCC.

It has been found that for school districts lacking appropriately qualified personnel and resources such a commitment was not unrealistic. A copy of the memorandum of agreement between the DNCC and the participating school districts detailing the responsibilities of the participants is provided.

In addition to local school district membership on the advisory board, area agency and parent participation has been solicited. This has resulted in the development by local school districts of an awareness and understanding of those services available within the geographic region served by the DNCC.

The Advisory Board, which includes the DNCC staff, serves as a forum for the sharing of information between school districts, agencies and parents. Members are asked to share information which may be beneficial to others in the group such as programs available in local school districts or professional development activities. Input is also requested as to the specific needs of the local districts and how the DNCC can best address those needs. Consequently, this diverse composition of the advisory board has served to facilitate the identification of not only the needs but the establishment of goals and objectives to address them.

To further facilitate interagency collaboration, the DNCC provides four additional services which have been well received by the participating members. These services include a Community Agency Resources Fair, a Resources Guide, a Resources Library, and a newsletter disseminated to the schools, agencies and parents within the area.

In summary, the advisory board and related activities of the DNCC may be viewed as facilitators for implementing the concept of multidisciplinary assessment in rural areas often isolated from the mainstream. They are, as mentioned, viable strategies for disseminating both services and information conducive to the development, implementation and continuation of service delivery systems to handicapped populations.

Facilitators/Inhibitors

Although interagency collaboration is recognized as a key factor to implementing the model there are several other components which are necessary to facilitate its effectiveness.

1. The availability of a relatively large pool of money from which such a center may operate.
2. The formation of a team composed of individuals from different disciplines with the expertise necessary to provide appropriate services.
3. The acquisition of a large number of tests and materials necessary to conduct assessments and related activities.
4. A central location which minimizes distances between school districts.
5. The attractiveness of working with a group of individuals and not being isolated professionally.

It is quite evident that one could identify many inhibitors to the implementation of such a model. However, the two main problems which we have identified are the time required to travel between school districts and schools within districts and the expressed concern by many school districts regarding the priority or urgency of providing assessments. Due to the geographic uniqueness of rural school districts and the socio-political factors found within districts the above mentioned inhibitors are best addressed individually by school districts which may consider he implementation of such a model.

Possible Modifications of Model

Although the DNCC is funded through a discretionary grant with no monies required from participating school districts, it is feasible that this model could be utilized in other rural areas. Rural school districts would have to make a commitment to work together. If each school district in our service area were asked to contribute funds to receive our services, their share would be only $7,684.00. This amount of money would not pay half the salary of one individual if the school district attempted to hire assessment personnel in any given area(s).

The distance between school districts will be a big factor in determining the number of districts which could form a cooperative. In areas with large populations perhaps only a few districts could be involved. For example, if four districts were involved each could provide the financial assistance to hire one individual team member plus an amount for administrative costs. If several school districts were involved, the amount of funding required of each would be substantially less.

In order that no one school district attempts to control the center or team an advisory board concept should be utilized to share the responsibility for the center.

The number of assessments which can be completed within a specified period of time are partially determined by the geographic size of the cooperative area. The distance to be traveled is a contributing factor to the number of children who can be assessed. The less time required for travel the more time available for assessment. Therefore, it is necessary that time frames and travel schedules be carefully scrutinized to meet local district and cooperative concerns.

Form E-4

Presentation Evaluation Form

Using the 1 to 5 scale provided, please respond to each of the following:

Objectives/Goals:	appropriate	1	2	3	4	5	inappropriate
Schedule:	appropriate	1	2	3	4	5	inappropriate
Format:	appropriate	1	2	3	4	5	inappropriate
Overall Evaluation of Presentation	appropriate	1	2	3	4	5	inappropriate

1. A one sentence reaction to the presentation

2. What suggestions do you have for future presentations of this material?

REV. 10/86

Form E-1

Diagnostic Center
Western Kentucky University

Evaluation of Assessment Services

Please rate the appropriateness of the assessment services provided to ______________________ by the Diagnostic Center staff using the scale of 1=Low and 4=High.

Area of Service	Quality of Service Low			High
Testing instruments were appropriate	1	2	3	4
Testing was comprehensive	1	2	3	4
Educational placement suggestions appropriate	1	2	3	4
Program recommendation useful	1	2	3	4
Staff members were professional	1	2	3	4
Staff available for consultation	1	2	3	4
Overall services	1	2	3	4

Please make additional comments that you feel would help us serve you better.

Name ______________________________
District ___________________________
Date ______________________________

Thank you. Return to:
Phyllis Schnacke, CSD
Diagnostic Center
Western Kentucky University
Bowling Green, KY 42101

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REV. [illegible]

Form E-2

Diagnostic Center
Western Kentucky University

Parent Evaluation of Diagnostic Center Report for

____
child's name

Do you understand why your child was referred for evaluation?
Yes ____ No ____

State his problem and referral reason ______________________________
____
____

Did you understand the test results?
Yes ____ No ____

If no, what part did you not understand? ______________________________
____
____

Please state any questions from the evaluation that you would like us to answer ____
____

Were the recommendations concerning your child's educational program helpful? Yes ____ No ____

Which recommendations do you think can be carried out at school?
____
____

Which recommendations can be carried out at home or in the community? ____
____

Are there other services needed by your child or family? Yes ___ No ___

If yes, please list them. ______________________________
____

Return to:
Phyllis Schnacke, CSD
The Diagnostic Center
Western Kentucky University
College of Education, Room 214
Bowling Green, KY 42101

Signature ____________________
Relation to child ______________
Date ________________________
Phone number _______________
Mailing address ______________
____

(If you need more space for comments, please use the back of this page.]

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ASSESSMENT PROCESS LEVELS

Level 1 - Referral

Level 2 - Prestaffing

Level 3 - Information Gathering

Level 4 - Screenings/Observations

Level 5 - Formal Assessment

Level 6 - Summary, Conclusions, Recommendations

Level 7 - Report submitted to SBARC

Level 8 - Placement/Programming (Regular or Special Education)

COMPONENTS OF A DIAGNOSTIC REPORT

Background Information

1. Child's name, age, school placement
2. Reason for referral
3. Person or persons with whom child lives

Social and Developmental History (may be parent interview)

1. Birth difficulties, if any
2. Developmental Milestones
3. Significant medical history

Adaptive Behavior

Conditions of Testing

Sensory Screening

1. Vision
2. Hearing

Observations

1. Classroom Observations
2. Testing Observations

Speech/Language Assessment

1. Receptive Language
2. Expressive Language
3. Auditory Processing
4. Articulation
5. Voice/Fluency
6. Examination of Oral Peripheral

Educational Assessment

1. Reading
2. Mathematics
3. Written Language
4. Spelling
5. Knowledge (ex., knowledge cluster of W-J)

Psychological Assessment

1. Intellectual Functioning
2. Visual Motor Integration
3. Self-Concept
4. Behavior

Other

May include one or more of the following:

- Physical Therapy
- Occupational Therapy
- Review of Medical Reports
- Evaluation by Low Vision Specialist
- Evaluation by Teacher of the Deaf

Summary

Conclusions/Recommendations

MEMORANDUM OF AGREEMENT

This Agreement between Western Kentucky University, Bowling Green, Kentucky, 42101, and seventeen school districts entered into this 31st day of May, 1986, specifies services to be delivered by the University through its Diagnostic Network Coordination Center and the desire to participate in the benefits of such services on behalf of the School District. Delivery of services under this Agreement shall be determined by the level of support provided in a proposed grant from the Kentucky State Department of Education and other conditions including those listed below. All materials and equipment purchased through this project will be maintained upon termination of this project by Western Kentucky University.

Under the provisions of the proposed grant, the Diagnostic Network Coordination Center will provide the following services:

1. On-site testing of first and second priority children at no cost to school district. All evaluations performed by certified personnel.
2. Provide a written report on each evaluation to the Admissions and Release Committee. An Action Summary will be included with the report when deemed necessary to aid the special education coordinator in providing services.
3. Provide a written report of the evaluation to each child's parent/guardian.
4. One or more representatives of the Diagnostic Center team will be available to attend ARC meetings and/or individual parent conferences when requested in order to interpret evaluation results and provide consultation services.
5. Contact or coordinate additional agency services recommended for individual children.
6. Conduct test demonstrations for school personnel based on their expressed needs in specific areas.
7. Provide consultative services to school personnel and families as requested.
8. Disseminate brochure on Diagnostic Center services.
9. Assist in Child Find Efforts.
10. Conduct formal meetings of the Advisory Board.
11. Provide an instrument for the evaluation of the Center's services to each child.
12. Cooperate in follow-up regarding educational and agency services to children.
13. Maintain a resource library available to school personnel and parents and disseminate information to requesting parties.
14. Provide training and technical assistance including inservice to participating members.

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15. Provide information and assistance for implementing transition policies.

16. Facilitate the integration into community based settings.

17. Serve as an advocate for all handicapped individuals.

In order to enhance the quality of services the Diagnostic Center can provide handicapped children, it will be necessary for the cooperative school districts to provide the following:

1. A completed Diagnostic Center referral form; information which would be helpful in understanding the unique needs of a given child; and photocopies of signed parent permission for testing form.

2. A copy of the most recent evaluation results and IEP in cases of re-evaluation.

3. Special Education Coordinators will arrange for appropriate facilities and insure that each child and parents are adequately informed and prepared for the evaluation.

4. The chair person of the ARC will insure that the Diagnostic Center team is informed regarding the schedule for the ARC placement meeting.

5. Return the provided feedback sheet regarding the Center's Services for each child.

6. Cooperate in follow-up by providing information regarding educational and agency services to each child evaluated by the Diagnostic Center.

7. Send representatives to the four (4) scheduled advisory board meetings.

I have read this Cooperative Agreement and Assurance Statement and wish to participate in the Diagnostic Network Coordination Center services.

____
Superintendent

____
Special Education Coordinator

____
School District

____
Date

REFERRAL FOR CRISIS EVALUATION

Diagnostic Network Coordination Center
Western Kentucky University
Bowling Green, Kentucky 42101
(502) 745-5363

School District ____________ Date ____________
School ____________ Special Education Coordinator ____________
Address ____________ ____________
____________ Zip ____________ (signature)
Phone ____________ Person filling out referral ____________
____
Position ____________

Child's Name ____________ Birthdate ____________ Sex ______

Child's Present Class Placement ______ How Long? ______ Teacher ______

Parent's Names/Guardian ____________

Address ____________ Zip ______ Phone ______

Reason for Referral ____________

____

Describe problems leading to Referral (be specific) ____________

____________***

List any interventions attempted and results ____________

____

Has the child had any previous evaluations? ______ Where? ______ Date ______

How does the child perform in the following areas

Fine Motor Activities ____________ Gross Motor ____________

Feeding ______ Dressing ______ Toileting ______ Hygiene ______

Basic concepts ______ Reading ______ Math ______ Spelling ______

Speech ____________ Language ____________

Does the child talk intelligibly? ______ In sentences? ______ Single words ______

Can the child point to pictures? ______ Answer questions? ______ Attend to tasks? ______

Does the child have a hearing loss? ______ Other physical problems? ______

****

***USE BACK OF PAGE FOR ANY ADDITIONAL INFORMATION

NOTE: A Crisis Evaluation is intended to help school districts with children who are in need of immediate evaluation because of readily apparent inappropriate educational placement. A referral will be promptly acted upon by the DNCC if the following conditions have been met:

1. Appropriate Crisis Referral form is completed in its entirety and need for such evaluation is documented fully.
2. No recent evaluation exists which would satisfy placement needs.
3. Efforts are made by local school systems to transport child to Western Kentucky University Diagnostic Center for evaluation.
4. Child shall not have been in present placement for more than six weeks.

To: Referring Individual

From: Phyllis Schnacke, CSD

The following information will be necessary for us to provide appropriate assessment services to your child/student.

1) Correct date of birth.
2) Complete information for all areas. Please feel free to use additional paper when necessary.
3) Include any work samples or other information pertinent to the referral.
4) If parents need help in completing their portion of the referral please provide assistance.
5) If assessment is to take place in the home, directions should be provided with the referral.
6) If previous test data is available, please include or provide information regarding when data can be obtained.

REV. 10/86

REFERRAL INFORMATION

School District____________________

School____________________

Address____________________

______________(zip)______

Phone____________________

Date____________________

Name and title of person requesting evaluation__________

Name and title of person completing this referral__________

Special Education Coordinator

____
(signature)

CHILD'S NAME____________________

Birthdate____________Sex______

Parent has been informed of rights:__________yes__________no

Consent to test forms are included with referral:__________yes__________no

Child's Present School Placement______________Teacher__________

Parent/Guardian's Name____________________

REASON FOR REFERRAL (Please Describe):

What are significant problems leading to referral (Please be specific):

When were these first noticed?____________________

What interventions have been attempted? (length of time; by whom; and reasons why if unsuccessful)____________________

Length of time child has been in present school____________________

How frequently has the child been absent from school?_______Why?__________

Specify any grades repeated____________________

Has the child ever been in Special Education?_______If so, when, where and what kind?____________________

Has the child ever been in remedial classes or had special tutoring?_______

If so, when, where and what kind?____________________

Has the child ever received speech therapy?_____Any other type of therapy?

______If you answered yes to either question, when, where, and by whom?____

PREVIOUS INDIVIDUAL TESTING:

State other educational, psychological, screening, etc., test results:

Date	Test/Agency/Examiner	Results

If additional space is needed, check one of the following spaces and use back side of this page if required Yes___ No___

STATEMENT OF CHILD'S STRENGTHS:

Academic: ____________________

Other: ____________________

STATEMENT OF CHILD'S WEAKNESSES:

Academic: ____________________

Other: ____________________

ACADEMIC ACHIEVEMENT: (e.g., KEST)

Reading: Test____________________ Date__________
Results____________________
Math: Test____________________ Date__________
Results____________________

Basic Skills: (as compared to other classmates)
Reading__________ Math__________
Spelling__________ Other__________
Written Work__________

ACADEMIC BEHAVIORS:

Does the child have problems copying materials correctly?__________
Does the child reverse letters?__________
Does the child have difficulty retaining and recalling auditory information?__________
Does the child have difficulty retaining visual information?__________
Can the child point to pictures?_____ Does this child respond to yes and no_____ Does this child understand the concepts of same and different____
Is the child's speech and/or language intelligible?__________
Is the child ambulatory?__________

SPEECH AND LANGUAGE:

Describe pertinent behaviors in the following areas:

Oral Language:
a) Vocabulary__________
b) Grammar__________
c) Sequencing__________
d) Word-Finding__________
e) Context__________

Written Language:
a) Grammar____________________
b) Sequencing____________________
c) Content____________________

Speech:
a) Articulation____________________
b) Fluency (Stuttering)____________________
c) Voice (Hoarse, loud, soft, nasality)____________________
d) Rate____________________
e) Feeding (diffculties in chewing, swallowing, drooling, drinking from a cup or straw, etc.)____________________

PHYSICAL DEVELOPMENT:

How does this child perform in the following areas:
Motor development - fine-motor activities____________________
gross-motor activities____________________

Self-help skills - feeding____________________
dressing____________________
toileting____________________
hygiene____________________

SOCIAL AND BEHAVIORAL ADJUSTMENT (please be as specific as possible)

How does this child get along with teachers and other adults at school?____________________

How does this child react to authority and discipline?____________________

How does this child get along with peers?____________________

This child appears to have:
__________no friends
__________a few friends
__________several friends

Is this child in play:
a leader__________
a follower__________

Describe child's awareness and adherence to classroom schedule:____________________

Describe child's behavior in other school activities: (lunch, P.E., library, playground)____________________

Describe the child's approach to classroom activities (Please be specific)____________________

How does this child handle materials, supplies, personal or school property?____________________

FAMILY BACKGROUND AND DEVELOPMENTAL HISTORY:

(To be filled out by parent or guardian) *

Father:____________Living_ Dec_ Address____________
City____________Zip________ Phone Number____________
Age________Occupation____________Years of Schooling________
Work place____________Phone number________
Work address____________Zip______

Mother:____________Living_ Dec_ Address____________
City____________ Zip________ Phone Number____________
Age________Occupation____________Years of Schooling________
Work place____________Phone number________
Work address____________Zip____

Guardian:____________(If different from above)
Address____________ City____________ Zip________
Phone Number____________
Age________Occupation____________Years of Schooling________
Work place____________Phone number________
Work address____________Zip______

With whom does the child live?____________
Has the child lived with anyone else? yes__ no__
If yes, who and relation to child?____________

Other household members:

Name	Age	Relationship to the Child	If in school, what school and grade

BIRTH AND DEVELOPMENT:

Was pregnancy with this child normal?_____
Describe any problems with pregnancy or birth of child____________
____

At what age did your child: Sit alone_____crawl_____walk________
say single words_____phrases_____sentences_____finger feed_______
use spoon_____cup_____date toilet training began_______date toilet training completed__________

Has the child been diagnosed as having a specific medical condition (e.g., Down Syndrome, Cerebral Palsy)? If yes, please explain____________
____

MEDICAL INFORMATION:

Describe any major illnesses, injuries or surgeries your child has experienced?____________
____

Are there any recurring illnesses?_____ If so, what?____________
____

Has your child ever had seizures (convulsions)? _____ If so, when did they first occur?____________ Does your child have these now?______________ How often?_____ What was done for treatment?______________________

Is your child presently on medication?____ If so, what kind?____________
How long has your child been on it?____________________________
If any side effects occur, please describe______________________

Are there any recurring illnesses?_____________________________
If so, what?______________________________________

Is your child under the care of a physician? If yes, please give name and address of physician______________________________

List all agencies from which the child has received services (e.g., Health Department, Crippled Children's Services, Child Evaluation Center), and include or attach all pertinent data______________________________

Is the child currently receiving services?_____ If so, where and how often?______________________________________

Are there difficulties with hearing or vision?____ If yes, describe in detail______________________________________

Is there a professionally diagnosed hearing loss?_______ Vision __________

Does the child wear hearing aids?_____

Does the child wear glasses?_____

SOCIAL ADJUSTMENT:

Describe how the child adjusts to new situations____________________

Has the child previously exhibited problems in school?______________
If yes, please describe in detail______________________________

Have there been family problems or tragedies, such as divorce, death of a family member, or loss of home to fire, that may affect the child?________
If so, please describe______________________________________

Describe how the child gets along with parents, siblings, and other household members______________________________________

With whom does your child play? Describe how he/she gets along in play situations______________________________________

What activities does your child like to do best?____________________

Which activities are disliked by your child?____________________
____

What do you see as your child's greatest strengths?____________________
____

In what areas is your child having difficulty?____________________
____

What questions or concerns about your child would you hope to have answered from this evaluation?____________________
____

Please add here any additional information that you can give us that would help us better understand your child____________________
____
____
____
____
____

Signature of person completing form____________________
Relationship to child____________________
Date__________

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PARENT PERMISSION FOR ASSESSMENT

Yes ______ No ______ I Understand the reason for referral of my child, ________________________ (child's name), for diagnostic services and I give my permission for ________________________ (name of school system) school system to refer my child to the Diagnostic Center at Western Kentucky University. The school system has informed me of my rights regarding assessment.

Yes ______ No ______ I authorize ________________________ school system and the Diagnostic Center at Western Kentucky University and their staffs to exchange information concerning my child.

____
Parent/Guardian

____
Date Signed

____
Person other than Parent

____
Relationship to child

PARTICIPANTS

Dr. Martha J. Cook
Coordinator, Project RISE
Department of Special Education
University of Alabama
P.O. Box 2592
Tuscaloosa, Alabama 35487-2592

Dr. Jennifer L. Kilgo
Coordinator, Master's Program in
Early Childhood Special Education
Virginia Commonwealth University
1015 W. Main Street
Richmond, Virginia

Betty Wells, OTR,MA
Motor Specialist, Project RISE
Department of Special Education
University of Alabama
P.O. Box 2592
Tuscaloosa, Alabama 35487-2592

Marion Duncan
Doctoral Student
Department of Special Education
University of Alabama
P.O. Box 2592
Tuscaloosa, Alabama 35487-2592

PRESENTATION TITLE

Transitioning Multi-Handicapped Preschoolers in Rural Areas

SESSION LEADER

Loreta Holder-Brown, Ph.D.
Chairperson, Orthopedically Handicapped and
Other Health Impaired
Department of Special Education
P.O. Box 2592
Tuscaloosa, Alabama 35487-2592

PRESENTATION MODE

Lecture

TRANSITIONING MULTI-HANDICAPPED PRESCHOOLERS IN RURAL AREAS

Presentation Abstract

The purpose of this presentation is to provide a framework for transitioning multi-handicapped preschoolers from early childhood special education programs to the public schools in rural areas. This framework consists of the following components:

Transdisciplinary Team Approach:

A transdisciplinary team is a service delivery model consisting of professionals from the many disciplines involved in intervention with children who are multi-handicapped. The purpose of the transdisciplinary model is to integrate the expertise of the team members so that assessment and intervention plans will be more comprehensive and efficient. This model or approach is especially useful in rural areas where resources are limited and a very diverse group of children are participating in preschool programs. The role of the transdisciplinary team in the transitional process is vital. The team's management of the child's new placement facilitates continuity of programming.

Parent Involvemnt and Training:

The second component of transition services for early childhood special education is parent involvement and training. PL 99-457, the 1986 Amendments to PL 94-142, require the development of an Individualized Family Services Plan (IFSP) for young children receiving intervention services. The IFSP is early childhood counterpart to the IEP for school-age children: the purpose of the plan is to include goals and objectives for family involvement, as well as educational goals and objectives for the infant. The family involvement portion of the IFSP should specify the role of the parent in the transition process, specific parent responsibilities related to transition, and parent training objectives. It has been proposed that the parent should serve as the transition coordinator and serve as advocate for the child. In order for the parent to assume this role, he/she must be well trained and fully informed of special education procedures and placement alternatives.

Assessment and Curriculum:

Transition-focused assessment and curriculum for early childhood special education is the third component of transition services. Special education preschool programs should prepare children for the next placement or least restrictive environment. Vincent, Salisbury, Walter, Brown, Guenewald, and Powers (1980) suggested that the assessment and curriculum should stress "social survival" skills as well as pre-academic skills. Additionally, transition curricular should address transition to natural community environments.

Interagency Cooperation:

Interagency cooperation is a fourth major component of early childhood transition programs. According to Nordike (1982) the goal of interagency cooperation is to improve services through better planning and coordination. Interagency can be facilitated by the development of interagency cooperative agreements which can establish policies and practices that assure communication, define roles/responsibilities for transition and clarify procedures involved with the transition from one program to the next. These agreements should be secured on both the state and local levels.

Individualized Transition Plans:

PL 99-457 requires an Individualized Transition Plan (ITP) as a part of the IFSP for early childhood services. For infants, this means that ITP's should focus on movement to the least restrictive preschool environment; for preschoolers, the least restrictive kindergarten environment; and for kindergartners, the least restrictive primary grade environment. Additionally each ITP should include community transition goals that will expand the range of community environments and activities available to young children. The least restrictive environment should be determined by trans-disciplinary team after the childs goals, objectives and related services needs have been identified.

Program Evaluation:

The success of transitioning young children from one program to the next least restrictive environment is one of the most important measures of early childhood special education effectiveness. Data should be collected on all children as they are transferred from one program to another and to new community environments. These follow-up activities provide continuous validation of subsequent environment curriculum techniques as well as other services, and may indicate when transition strategies need to be modified.

Objectives:

In considering the salient features of successful transitioning, a number of goals are implicit for providing effective early childhood transition services for young multi-handicapped children. The goals are related to early childhood agencies, personnel and parents, and program, curriculum, and are listed as follows:

1. To establish strong linkages between programs and agencies by providing for (a) appropriate scheduling of transition events; (b) timely transfer of records to the receiving agency; and (c) minimal disruption in programs or services.
2. To insure that parents and all personnel are informed of the mechanics of the transition through thorough preparation of the receiving teacher and other professionals and parent involvement.
3. To develop a transition plan and examine its impact on the multi-handicapped preschooler through (a) an individualized curriculum that reflects functional motor and communication skills needed to successfully survive in the public school environment, (b) preparation of the child and family for differences that will exist in the new environment, and (c) continuity of programming from one placement to the next.

The practical implications will be demonstrated by a slide presentation which depicts all elements of a model transition program for multi-handicapped preschooler with emphasis on: transdisciplinary teaming and arena assessment with the teacher as primary facilitation; intensive preparation of families including advocacy input; and a model assessment and curriculum developed at the RISE Program. Additionally, printed materials will be provided to the participants.

Katee Tully
East Carolina University
Greenville, NC 27858

LEGISLATORS' SCHOOL FOR YOUTH LEADERSHIP DEVELOPMENT

Many of the special programs that are offered during the summer months are directed at expanding students' skills in the areas of mathematics, science, computer technology, or foreign languages. Some programs provide opportunities in the arts such as in painting, sculpture, dance, etc. Of course, there are also those courses that are remedial in nature, for students who did not successfully complete the requirements during the school year. The special programs that are not remedial are often limited to students who have been identified as gifted and talented and who compete for the limited spaces available.

Historically, these programs have taken place in urban settings. The programs are usually centered in a large school district or on a college or university campus. Often, just the distance from the program precludes participation by rural students. In response to this situation, a unique residential summer school program has been initiated to provide rural students with the opportunity to build their leadership, communication and thinking skills. This program does not have academic achievement criteria, has a 3:1 rural to urban student ratio, provides room and board for its participants, and centers around an experiential curriculum that allows students to learn through performance to think, communicate and exercise leadership skills.

The Rural Education Institute, of the School of Education at East Carolina University received funding from the 1985 Session of the North Carolina General Assembly to operate, for two consecutive summers, a residential summer school program for 300 young people in eastern North Carolina. The Office for Rural Education at Western Carolina University received the same funding to operate the program for 300 western North Carolina youth. The program operates as two three-week sessions - from the third week in June through the first week in August. The first session serves 150 rising seventh and eighth graders and the second session serves 150 rising ninth through twelfth graders. The summer school is designed for those students who have demonstrated leadership potential but who may not have had the opportunity to fully exercise this potential. A list of descriptors was developed by teachers, counselors, and principals from across the state to be used by local schools as guidelines to follow when nominating students to the program. The list of criteria for nomination includes such personal attributes as good interpersonal skills, responsible citizenship, respectful of other's rights, motivated, creative, initiatory and cooperative. Students identified by the North Carolina State Department of Public Instruction guidelines as gifted and talented are not eligible for this program.

The process for nomination, recommendation, and selection to the program begins at the local school level. Schools are sent nomination packets and directed to form a selection committee to solicit student nominations from teachers, counselors, prinicpals, superintendents, community persons, peers and from the students themselves. From the pool of nominees, the committee selects two names for submission to the Rural Education Institute. A computerized random selection process chooses one student from each of the 68 Local Education Agencies in the eastern region of North Carolina. A second random selection process chooses the remaining students. The final total population reflects the 3:1 rural to urban student ratio which was mandated by the legislation authorizing this program.

The curriculum for this program is highly experiential and is intended to raise the students' levels of motivation and creativity. Students are encouraged to develop and use thinking processes that enhance leadership potential. Teachers who have demonstrated successful experiential teaching practices teach the activities. Prior to beginning the program, all instructors receive one week of training on incorporating thinking skill development into their instruction.

The attending students receive four days of Basic Seminars which expose them to experiential leadership building situations. The four days are labeled 1) Leadership and Self, which is the execution of a ropes course and the synthesis of individual and team leadership skills needed for performance; 2) Leadership and Communication, which exposes students to those communication skills such as writing, interviewing, listening, and public speaking, that are necessary in various leadership roles and situations; 3) Leadership and the Future, which is designed to help students envision the future and some of the critical issues that they will face as future leaders; 4) Leadership and Thinking, which encourages students to learn how to learn, to develop skills to attain and develop concepts, problem solve, make decisions, reason and think critically.

During the four days of Basic Seminars, the students begin to focus on topics that they wish to explore further. Groups with similar interests choose an area and gather information using a past, present, and future perspective (i.e. how beach erosion has progressed, what its effects are today, and what the future implications are). Students plan and produce a creative final product called a scenerio (it may be a videotape, film, dance, art project, play, etc.) that reflects the information they have processed. In addition to scenerio production much of the remaining time is spent in active involvement in skill development labs (photography, video production, art, drama, computers), in structured recreation, and in classes on such topics as improving SAT scores and test-taking skills, assertiveness training, interviewing and public speaking techniques, management and organization, and community development. Students are also provided with structured access to many of the valuable and interesting resources in eastern North Carolina. Groups of students spend time at North Carolina's Outer Banks engaged in such activities as observing and learning about the migration of the Loggerhead Turtles, studying beach erosion, visiting the marine biology resource center, visiting historical and cultural sites, and attending plays.

During the final days of the program the students reflect on the thinking, communication and leadership processes acquired over the three week period and set some short-term and long-term goals for themselves.

This program offers an exciting opportunity for rural youth in North Carolina. It has been designed as a model for use by other rural communities in the United States dedicated to providing outstanding learning opportunities for their youth.

RURAL EDUCATION INSTITUTE
SCHOOL OF EDUCATION
WILLIS BUILDING
EAST CAROLINA UNIVERSITY
GREENVILLE, NORTH CAROLINA 27858
919-757-6008

GENERAL SESSION

THURSDAY, MARCH 19, 1987

8:30 - 10:00 AM

Linda Gibbs, SpecialNet Coordinator:

Good morning - Doris asked me to take about five minutes and tell you what it costs an average user to belong to SpecialNet. That's become an increasingly difficult question for me to answer because SpecialNet has been around now for five, almost six years. There are so many applications of SpecialNet that for the average user, SpecialNet is no longer an add-on cost, but it's become a cost-effective way of doing something that would have been done in a more traditional method, such as telephones or mail. I thought it might be helpful if you weren't a SpecialNet user to give you a few examples of what I mean. For example, the Vision Bulletin Board on SpecialNet is used by vision consultants to share brailled and large print text. They save anywhere from $500 to $2000 a week by sharing resources, so for them the $200 a year subscription is made up within a week.

Another example came to mind last night. A director said to me just last week in Indiana, "You know we used to budget a thousand dollars to advertise the positions we have in our school district in local newspapers. We don't have to do that anymore. We put them on SpecialNet, they get national attention, and if that's all we did on SpecialNet, that has more than paid for the $200 subscription."

The state of Florida uses SpecialNet to communicate with all of their local administrators. They've kept a lot of cost data, but just to give you an example of what they're saving--to send out a mailing to the local school districts in Florida, one mailing costs $362. That's to get it printed, in the mail, and so on--besides the time it takes. To put that same message on SpecialNet costs them 45 cents. So they've more than made the subscription up in one day in that state.

A final example that I would like to share with you is one of the most interesting. About a year ago, we received a call from Michigan, which wanted to put kids on SpecialNet. And we thought, "Oh no, of all the uses of SpecialNet, can you see having kids on line, using connect time?" And we kind of discouraged the Michigan contact, but he forged ahead because he felt it was important for the handicapped kids in rural areas to have the opportunity to communicate with other kids in neighboring towns. They had tried pen pal letters, but by the time they got a return letter, they couldn't remember who they had written to. What has been found, after a year, is that this project has captured the attention of local groups. Fifteen Apples have been given for this project this year--that and all of the equipment is worth $20,000--just by capturing the imagination of some of their local community people.

What I would like to say to you in closing is, that for the majority of users who use SpecialNet and the resources on it, it is not an add-on cost. It is a cost saving for them. If they had to use mail and telephones in the traditional way, it's a lot more expensive. If you're not familiar with SpecialNet and all the resources you have available, I would like to invite you to come by. I'm in the exhibit area. I would be very glad to show you how it works and talk with you about any applications that might make sense for you.

Doris Helge, Facilitator:

We have a series of awards. These came from memberships saying, 'we really want to recognize exemplary programs--we want to raise money for scholarships.' I believe last night the final figure was $1300 from the auction. We have two scholarship winners this year. We want to thank all of the ACRES members who reviewed those scholarship applications. We also want to thank all the ACRES members who reviewed the applications for the exemplary program award. Both the exemplary program award and the scholarship winners will receive national publicity--not only through our office and publications, but they'll be picked up by publications like U.S. Today and Education Week. I think that will be a big step toward raising the consciousness of this country about the importance of rural schools and the fact that rural schools can do things right. There is an absolute myriad of things that are going on around the country that are working beautifully, and we want to share those with others.

We have one surprise award first, and someone's here to receive it and doesn't know he's here to receive it. Joe Roberts, would you come forward, please? Every year we have an 'ACRES Member of the Year' award; this is decided in-house, by the staff. This year the staff awarded two ACRES Members of the Year awards. Joe Roberts is here to receive his - Elizabeth Kosleski could not be with us, she's busy doing things in Colorado. Joe and Elizabeth both have strong state-wide efforts, and they're promoting the cause of rural special education in their state and within their region. We thank them both very much.

We have asked the award winners in the various program competitions to spend a couple of minutes describing their program to you. I know that you'll want to grab them afterwards and ask them specific details, but we at least wanted to give them that much overview time.

The first one is in Preservice Training. There is a truly exemplary program at Northern Arizona University in rural special education. Janice Schnorr is here to receive that award; she directs the program.

Janice Schnorr, Director of Northern Arizona University Rural Special Education Project:

Good morning. It's really an honor for me to be here today. I have participated in ACRES for the last three years, and I've had an opportunity to travel to different parts of the United States. As you know, Northern Arizona University (NAU) is located in the Southwest, and our programs in that particular area are geared primarily for Native Americans. So I represent a rather unique kind of a program. Actually, at NAU we have approximately 6-7% enrollment of Native Americans, probably one of the highest, nationally, for any college or university. Our mandate within the state is to serve Native Americans. That's one of our primary programs.

Within the program that I direct--the Rural Special Education Project--I wanted to find out exactly how many rural education school districts needed various kinds of staff. Therefore, on a yearly basis, I conduct a needs analysis. Out of approximately 250 school districts in the state, we have 199 that qualify as rural districts. Of those rural districts, when I conducted the analysis last year, in May, we needed more than 150 teachers.

The reason we need so many teachers is because of our unique circumstances. We have 21 Indian reservations in Arizona. Approximately 80% of the land is in private ownership, so the rest of it is rural--

Indian reservations or government owned land–so we have clusters of small communities throughout the state. In that particular area, many of our schools are located 50 miles from paved roads. This creates problems because we have people who don't want to go to those remote areas. When you think of Arizona, most people think of the desert and Phoenix, so when they come to Arizona and they can't get a job in the Phoenix area, they'll go to the rural area for one year and eventually work into Phoenix.

In my project, I wanted to avoid that problem of recruiting individuals who wanted to come to the state and work in Phoenix. With that in mind, I go directly to the school districts and work with them. I identify school districts that have problems recruiting and retaining teachers and I ask them for recommendations regarding their staff–who is interested in special education, and who might stay in that district and teach special education. I take recommendations directly from the school districts, then I offer stipends to those individuals. I think I made my view very clear yesterday that I feel people should be paid for working on degrees in special education as part of a fringe benefit and a reward system for teachers.

When teachers come to Northern Arizona University, I pay them $2000 for summer work. This includes 2-5 week summer sessions, during which they take two classes, so they can earn a total of 12 credits during the summer. Generally, it takes approximately three summers to complete their course work towards their master's degree in special education. For the past two years they've been able to earn degrees toward the area of mental retardation, learning disabilities, and emotionally handicapped.

I found out, by working with students, that they also needed to obtain certifications in the area of the physically handicapped and the severe and profound. With that in mind, I have worked cooperatively with our state department of education. We are co-sponsoring some special courses during the summer that deal with those two areas so that people can obtain certification. This is like an interagency agreement, because otherwise these courses would not be offered in the state. If students want to obtain certifications in areas where we don't offer coursework, we will pay for them to go to other institutions in the state, or out-of-state, in order to obtain those certifications. So the program is fairly flexible. In addition, I do offer two full-year, or academic year, scholarships; when students come to pursue those kinds of programs during the academic year, I pay them $6000. I feel that all of this money is essential for them because otherwise they would not be able to support themselves while they are away from their home community.

I am really pleased to say that of the 19 people who have participated in the program to date, all 19 are still serving students, and they are in those same communities from which I recruited them. This year they are serving approximately 250 special education students. With that in mind, I want to thank those students and share with them this particular award. Thank-you.

Doris Helge:

The next award is for early-childhood intervention. This particular program is for birth- through-three year old serving severely handicapped children. The recipients are from the Little Tennessee Valley Educational Cooperative. And I can tell you from experience, that is definitely rural. Pamela Potocik and Cynthia Marshall, the coordinators, are here to accept the award and explain a little bit about the program to you.

Pamela Potocik, Co-coordinator of Little Tennessee Valley Educational Cooperative Birth-through-Three Year Old Seriously Handicapped Program:

When Cindy and I were discussing that we had about five minutes to talk about our program, we thought we couldn't tell you much. But since we're in early childhood, we could probably play "Academy Awards" and say that we need to thank all the little people that made the award possible.

Basically, the Birth-Through-Three Program began in 1981 under the Handicapped Children's Early Education Programs (HCEEP). We had a model demonstration program, and after the first three years we have gone on to locally-based funding to continue the services. We serve severely multi-handicapped children under three different criteria. Primarily, children are diagnosed for medical conditions associated with retardation, or through psychological evaluation, or, finally, they have multi-handicaps in several areas of development.

The core philosophy of the program is that, for severely handicapped children, it requires a staff of highly trained professionals from different disciplines to develop the individualized curriculum for each child. Secondly, it is necessary in rural areas to get locally-based centers, so each area can identify with their own children and feel the ownership of their program. The important part of the local-based centers and getting high-tech professionals is that we operate under the umbrella of a cooperative management system. Little Tennessee Valley Educational Cooperative is a public, non-profit cooperative education system that can manage as a regional agency and provide cooperating professionals of high-tech caliber to get the services to children in these communities.

We operate under center-based programming, as I previously mentioned, but we have home-based components for families also. It's typical for most early childhood program services to include the usual types of things in terms of referrals and screenings. We do have extensive assessment procedures and intense intervention programs. We collect data through re-evaluations, we assist in transitions to other programs, and coordinate with other agencies. It is very important that we note the unique features of the program. I'm going to leave that to Cindy to describe in a little more detail so you can see how we provide services in a unique way in rural areas under a cooperative system. Thank-you very much.

Cindy Marshall, Co-coordinator:

As Pam was saying, the key word about our program is cooperative. We're having a nice, cooperative way of making this presentation right now. The things that make our program unique and make it work in a mountainous rural community, first of all, are what we call the multi-professional team. We looked at what's typically called the multi-disciplinary team. We looked at what's typically called the trans-disciplinary team, and we took the best features of both of those and made a multi-professional team; it's a system that works. It gets very educated, very technically talented people out into a mountainous community, at a place where normally that kind of access just doesn't occur. Because of the structure of both the cooperative and the multi-professional team, we have a base for providing emotional support to staff members that is typically not available in rural communities. Typically, you're the only speech therapist and you're out there all alone. Whatever your job, is we have been able to prevent that from happening. And that's why people come to the cooperative and stay for long periods of time. Not only is there emotional support, but the administration supports staff for doing the right thing for children. You're expected to use your expertise to determine what's the best–not what fits in the budget–and then strive to find how to get the best thing for that child. We don't use any set curriculum plan. Instead, we allow our staff members freedom to draw from their own professional expertise and from the wide variety of curriculums that are already available. What happens is that you design a very unique program, for every child, that deals specifically with that child's needs, his unique learning styles and as a person.

Basically, what it all boils down to is we have taken PL 94-142, extended it to birth, and we are following it as closely as we can within financial restrictions–the way it was originally designed to be–getting the children exactly what it is they need. We have put an emphasis on research, child progress data, and parent perception data on a year-to-year basis. On the average, our children make better than twice their expected gains on a year-to-year basis, and that is statistically significant according to the computers. So we've got a program that works, and we feel really good about that. Thank-you.

Doris Helge:

Thank you both very much. I think you understand now what the mandate for early childhood education is, that it's an increasingly important area, and they certainly have a fine program.

The next category of award winners is a hot topic. That's vocational training in transition. The award winners are from a secondary community-based transition program in Coeur d'Alene, Idaho, and the persons who will accept the award this morning are Julie Green and Emmett Arndt.

Emmett Arndt, Secondary Community-based Transition Program:

Coeur d'Alene is a community located in northern Idaho, in the panhandle about 30 miles east of Spokane, Washington. On behalf of that school district it is a privilege for me to accept this award, particularly when you consider all the wonderful things that all of you are doing. Notice how I resisted "y'all." It also recognizes the great work that our special educators have done in developing this program, one of whom is Julie, who is particularly instrumental in bringing it about. It also recognizes our community. The employers of our students in the community have been very supportive. It's most gratifying to us, particularly when you consider that our rate of unemployment is at 12%. They have done a terrific job in openly accepting our students as employees in the community. Thank you very much for this recognition.

Julie Green, Secondary Community-based Transition Program:

Thank you, Emmett. We are, of course, delighted to be here and to receive this award. As Emmett told you, we are located in northern Idaho in what I think would be termed definitely a rural area. Our program does, of course, directly relate to transition. We go by the very classical definition of transition in that this does imply change. That change starts in the high school, with our population of about 46 students ranging in abilities from moderately retarded through mildly handicapped. Our philosophy is very simple--to make these people independent and contributing members of our society and our community. As Emmett indicated, that is very easy in Coeur d'Alene because we have a very accepting and nurturing type of situation there.

We have our program divided into two basic components. The first is a traditional, self-contained type of situation which we call "life skills."We address that in a domain-related delivery system. We have four curricular domains. One is personal management; the other is called community functioning, where we actually do take the kids out for community-based kind of learning. We have, of course, a vocational strand and a recreation and leisure components.

One of our program goals is to have the kids out in the community a minimum of 35% of their school day. We are able to eclipse that amount just about every single day. Our staff includes three full-time special education teachers, a full-time instructional aide, and myself as program director. In this component of the self-contained community-based life skills program, our kids are out in the community five days a week. They do grocery shopping, banking skills–they all have a job. All of our students are paid for those jobs, and I will address that in just a minute.

The second component of our program is a resource room-based model. This is with kids who have been previously staffed into the resource room, all identified as learning disabled. Our program at this point is called COPE, which is an acronym for Coeur d'Alene Occupational Prevocational Education. Since we're all in education, as you know, acronyms are definitely the way we tend to go. These students make a two year commitment to this program. They are in a classroom situation for an hour each day in an employabilities-based skills class. The second year of this program is linked not only with one hour a day of classroom instruction, but with placement in the community on a paying job as well. They receive class credit for this–they do get a grade that is based on the employer's evaluation and, as I said, they do get a wage, which is usually their favorite thing.

With wages, we felt that we needed to make a very definite commitment, because earning a wage is an incentive and a very important part of working. Our school district and our special education director made a very accepting type of commitment, and we have allocated a certain part of our special education budget towards paying our self-contained students who are on work experience. We go through the Idaho Wage and Labor Standards Board–we secure a Subminimum Wage Handicapped Learner's Certificate allowing us to pay them at less than the going minimum wage in Idaho. This is based on a productivity rate. We assess the children as opposed to a nonhandicapped worker doing that same job. From that rate we put forth a progression of wages, and that is determined by the amount of change and gain that they make. All of our COPE students or resource room students are paid by the employer. We use some Department of Employment incentives whenever possible. That has been a great addition to our program.

One very strong part of our program is that of the peer tutor situation. These are juniors and seniors in our high school who volunteer to become peer models and peer tutors for our handicapped students in the self-contained component. They receive a full class credit for this as well as a grade. These students work with the handicapped children in the classroom as well as out in the community. That has been a tremendous benefit both for the peer tutors as well as our students.

We believe in transition. We believe it works. We are in our third year of operation, and our statistics indicate we're running at just about 85% employability after graduation. So, we're feeling that these students are making some gains that weren't there before.

We would be very happy to have you come and visit us. We would also be very happy to come and visit you. We feel that we have gained many, many ideas from sharing and the exchange and dissemination of information. We thank you very much for this and, again, invite you to come and see us. Thanks.

Doris Helge:

If one of the definitions of rural is that Third Street is at the edge of town, it's extremely important that we have interagency collaboration, and that is the group under which the next award winner falls. It's the Yellowstone/West Carbon County Special Services Cooperative. It's in Laurel, Montana, and Vern Barkell, director of that program, is here to accept the award.

Vern Barkell, Director, Yellowstone West/Carbon County Special Services:

I'm really pleased to be here to accept this award. Our organization was selected for a couple of items–according to the nomination that was submitted for us. The first has to do with inter-local cooperation in the area of preschool education. Because all of the agencies in south central Montana have very limited funds, we need to use those funds in the most appropriate, cost-effective way possible. There are several agencies in our area that provide services to preschool children. Through the efforts of our cooperative staff and the staff members from other agencies, we have worked out a successful, but fairly informal, system to serve the needs of the children without duplicating services. We have made a concerted effort in this area to be as non-territorial as possible when it comes to providing preschool services. We readily share materials and methods among our different agencies, and we always have other agencies involved in our IEP meetings. It's through this system that we've been able to provide appropriate preschool services while holding down costs for all of the agencies that are involved. I think we've been fairly successful in this since it's one of those other agencies, a group called STEP–Special Training for Exceptional People–who nominated us for this award.

The second area that we're particularly proud of has to do with our resource consultant in our curriculum library. Our curriculum library was developed several years ago because of the need for appropriate quality materials in our twenty school districts that we serve. Several of our districts are one-teacher schools. In somewhat larger districts we have a number of teachers but they serve multi-grades. These particular schools really do not have a lot of daily access to special ed-trained personnel to work with their handicapped population. Our experience has also shown us that most of the time in these small schools, the regular classroom teachers can provide appropriate services to their handicapped students if they have access to a couple of items. The first thing they need is good sound advice on how to deal with the problem a student presents. They want to know what the problems are, and they want to have the appropriate materials to help serve the particular students in need. This is where our resource consultant in our curriculum library comes in. Our consultant works closely with local school personnel, demonstrating teaching methods and providing insight about how to effectively work with particular students. In this capacity, he travels approximately 2,000 miles a month--which probably doesn't shock many of you because you come from similar situations. The work that our consultant does with regular ed teachers is as much or as little as necessary, depending upon the needs of the particular student or the teacher in question. Because our consultant has many years of experience working with all ages and types of handicapped students, he provides help to teachers with students that are having behavioral as well as academic problems.

In conjunction with this, our cooperative also has developed an extensive curriculum library where materials are available to all of the schools in our co-op. We have obtained several thousand dollars worth of real quality materials in the nature of text books, computer software, and off-level curriculum materials for all of the solid academic subjects that students may need to take. Funds for these materials have come mainly from EHA Part B flow-through money; also, in the past two or three years, we have been able to obtain materials from publishers at no cost to ourselves. Because we serve a base student population of approximately 4,500 kids in twenty districts, the publishers that we write to requesting free information feel that by sending us these free materials, they're making a pretty good investment. In the past, schools that had access to preview copies of materials have, in fact, turned around and purchased those materials from the company at a later time. The materials in our resource library are used for both special ed and non-special ed students. We don't delineate between the two as long as the special ed kids get the materials and the things they need. We turn these materials over to the classroom teacher, and we really don't care if they're used with other kids as well.

We make available to the classroom teacher a catalog containing all of the materials in a list; they can then call our office to request whatever materials they wish from our library, to be delivered to them by the resource consultant. They also have the opportunity to stop by our library one Saturday a month to look around for themselves and select some materials they think might be appropriate. The amount and the breadth of the materials that we have in our library could not be duplicated in any of our local schools, if one were to try to do that individually. They don't have the space for it and they don't have the dollars to supply it. This service is probably one of the most popular services that we provide. The resource consultant that travels and provides the materials is probably the most popular member of our staff, because he provides things that classroom teachers need and he provides follow-up to make sure that those things are being used appropriately. So, we find that the system has worked very well, and intend to continue to do that as long as the schools are interested.

We're very proud and honored to receive this award. Montana, as a lot of states right now, is going through a time of some real economic hardship because we're dependent on oil and coal money. Some of you may be in the same spot. For the past year and a half we've received pretty much nothing but bad news state-wide in education. Our cooperative alone has received cuts of about 8% over the last two years. This kind of an award really boosts people's morale, and makes them feel very good about what they've done for the kids in the community. We thank you again very much.

Doris Helge:

The audience thanks you for what you do for kids. It tells us a little bit about how difficult it is to provide services for severely handicapped children. The next award is under severe exceptionalities, and it's the Hamilton-Holmes Elementary School from King William, Virginia. Mickey VanDerwerker is the special ed coordinator who's here to accept that award.

Mickey VanDerwerker, Special Educator, Hamilton-Holmes Elementary School:

Actually, I'm the wrong person to be up here. I'm the special ed teacher in the school, and it really should be the regular teachers who are up here receiving the award; but there would be too many, so I got elected.

Three years ago, my children who are in a program that's called the TMR program–but includes children with moderate and severe handicapping conditions–were moved to Hamilton-Holmes, and I moved along with them. We were told at that point, 'don't even think about putting your kids into regular ed, it will not happen.' So, I talked to some folks and I convinced them that they could handle my kids–I was sure they could. We started off with some of the children going to the regular classrooms and teachers, and it has evolved into a program where I am a resource teacher in the more traditional resource models of special education, which is very unusual for children who are moderately and severely handicapped.

The best way to explain it to you is to tell you what it looks like, so we decided we would tell you about one of the children in the program. Mark is a fourth grader in our school. He comes on the regular bus and goes with thousands of other children to fourth grade, where he has his locker and a desk. He lines up to give his lunch money to his teacher, and then plays games with his class in fourth grade. When the classes change in fourth grade, he comes back to me where we do the training that's basically listed on the IEP, the traditional special education things. We don't have special ed P.E., we don't have special ed art; what happens is that Mark goes back to that fourth grades class, lines up, and goes to art with his class. He also goes to P.E., he goes to the library, he goes to music with that class.

The interesting thing about it is that Mark came into the program with an I.Q. under 40; he has limited communication skills, limited mainly to echolalia, and will never be independent–according to his psychological report. To see Mark in the fourth grade, you'd never know it was the same kid. He talks to his friends, he has children in that fourth grade class who look for him to come with them places, he goes on the fourth grade field trip, he goes to the fourth grade parties. When we combine the time that they spend in that regular home room or in our peer tutoring program or in community-based training, our children are spending time with non-handicapped people from 40-80% of the school week which we feel is very impressive. Our teachers--not me, but the regular teachers--are the reason why this program works. They're the ones that should be accepting this award, so on behalf of them, thank you.

Doris Helge:

Thank you very much. The next award is in a category that disturbs a lot of us because we have so much to do, and we're just beginning. That's cross-cultural services. The award winner is from an area that's going to make your mouth water and that's King Salmon, Alaska. From the Lake and Peninsula School District, Ron Jones, the director, is here to accept that award.

Ron Jones, Director, Lake and Peninsula School District:

We are extremely pleased to be in Asheville, N.C. this morning. Out of the far north cold country, we thank the ACRES organization, and specifically Nate Norris with the special education service agency in Alaska, for the nomination for this particular award.

I'll tell you a little bit about our school district and the programs that we have available for handicapped youngsters in the Lake and Peninsula School District--the name is derived from two specific geographic locations in our district. The Eliomah Lake Area, in the far north end of the district, is about ninety miles long and comparable to some of the Great Lakes in the northern part of the United States. The peninsula name is for the Alaskan Peninsula, which starts about three-hundred miles southwest of Anchorage and terminates at the beginning of the Aleutian chain of islands. Our district covers some four-hundred miles in length, and width--at the widest portion of the district--is about eighty miles. That's 22,000 square miles, comparable to the state of Tennessee.

We have fourteen separate village schools, and a native population of about 95% Alaskan Natives--these are Athabascan Indians, Central Upik Eskimos, and Aleutian Indians. It is an extreme challenge for an Oklahoma boy to be working with the Alaska Native populations. Our special ed program consists of an Itinerant Resource Room program. We have four certified special ed teachers, six special education aides, a full time speech-language therapist, a psychologist, a counselor, and myself. I serve as director of this particular program. There is also the bilingual program, the migrant ed program, Chapter 1, Chapter 2, 89-313, and evaluation of four sites. That's our special ed staff. We're spread quite thin. The economy of that particular area is based on commercial fishing. We are in the middle of the largest red salmon fishery in the world.

Funding, to this point, has not been a great problem. Alaska, as you have probably been noticing in the papers down in the lower 48, is now beginning to experience some of the financial difficulties that other states with economies based on oil are experiencing. We are trying to provide services for special ed kids, not in a rural area, but a remote area. I've heard several comments this morning about driving through certain areas, e.g., rural areas in Tennessee. In our particular area, you do not drive. We have seventeen miles of paved road on the peninsula, and it is not even located within our district boundaries. It is within the Bristol Bay Borough School district, which is in the center of the peninsula area. The only way that we can get back and forth to our schools is by small airplane. Our total district transportation budget runs in the area of a half a million dollars. It's all by contract, one-engine plane.

Again, we would like to say thanks to the ACRES organization for the award. I'd be more than happy to visit with any of you folks concerning our program and I would like to visit with you concerning yours. Thank you.

Doris Helge:

Again, we thank the people who took so much time to carefully review all of the applications for this and for the scholarship program. I think probably a number of people were wondering how they were going to take a trip to visit some of these programs, perhaps get a tax deduction enroute, so you'll probably see some visitors during the next year. Outstanding programs, outstanding people, and we congratulate all of you.

I understand that Ruth Dial-Woods is in the audience. She is one of the student scholarship award winners. The money has been raised thus far by donations from ACRES members and by the auction raffle each year. It was initiated because of the tremendous difficulties that we have in recruiting and retaining rural special educators. We thought if we could get some national visibility for some people who are students, who are doing some exceptional things, and help them in their careers, that this scholarship fund can grow and grow, and the publicity for the whole rural special education movement can also grow. Would you please come forward, Ruth.

Ruth Dial-Woods, Scholarship Recipient:

Good morning. I'm sure that since you've been here since Monday that many people have welcomed you to North Carolina, but allow me to also extend my welcome this morning to my native state and my native homeland. It's with a great deal of humility that I thank the American Council on Rural Special Education for awarding me a scholarship to continue doctoral studies at South Carolina State College.

Some individuals experience mid-life crisis in different ways. I chose to cope with mine by returning to graduate school at the age of 50 to pursue a dream that my parents hailed, and one which I am pursuing in order to help others to dream. Your investment in my education is an investment in the 15,400 youngsters in the Robinson County Rural School District in southeastern North Carolina, about six hours from here. I serve as the chief executive officer for the Educational Support Program, much like the gentleman from Alaska, where I have titles for Indian education, migrant education, ECIA Chapter 1, a cooperative project with exceptional children's division for a pilot program, preschool education for three-and-four year olds, and two pilot youth reconnection drop-out projects--all of which are Indian replications.

Your investment in my education is also to fulfill my American Indian prophecy that when our people have been pushed as far west as the setting sun, they shall stand and turn and look to the east, and we shall join hands and be reunited. I pledge my commitment and diligence to strive to meet your expectations and to foster the goals of this organization. My work and my studies are continuous sources of self-renewal, but your consideration and your financial support will serve to continue to inspire me to meet the challenge of providing service as the price for the space that I occupy. I thank all of you on behalf of my grandparents, my parents, my family, my school district and my institution and my life's work.

Doris Helge:

I think a number of people are going to want to visit with her. She explained herself in that very brief appearance, and I think its obvious why she was selected. Her field, incidently, is education administration.

The other scholarship award winner this year is not able to be with us, because for some reason she felt she should take finals this week. Her name is Crystal Strasburg. She is working on a bachelor's degree in elementary and secondary education at Doane College in Crete, Nebraska, and we congratulate her.

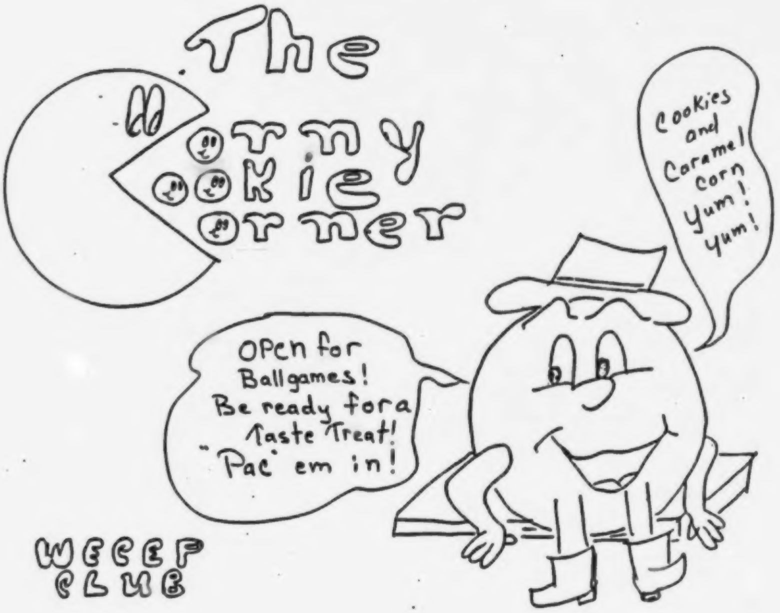
CONCURRENT SESSIONS

THURSDAY, MARCH 19, 1987

10:20 - 11:50 AM

PRESENTATION REFERENCE NUMBER 80
PRESENTER: BONNIE SCHMALLE
NORTH FAYETTE COMMUNITY SCHOOLS
P. O. BOX 73
WEST UNION, IOWA 52175

CONFERENCE HANDOUTS:
COULD THE CORNY COOKIE CORNER
WORK IN YOUR SCHOOL?


The Corny Cookie Corner
Cookies and Caramel corn Yum! Yum!
Open for Ballgames! Be ready for a Taste Treat! "Pac" em in!
WECEP CLUB

THE JOB-TASK REPORTING SYSTEM

Our career education program for students with mild mental disabilities involves students in a business. The activities of students in their bake shop provides teachers and support personnel with information that assists them in making instructional and vocational placement decisions.

We had found that students had a difficult time in defining their work experiences. In order to help students identify skills that they were developing as workers in their classroom bake shop, a student-oriented, job-task reporting system was initiated. Twenty-five worker functions were identified as job tasks. As the students progressed as workers, they were expected to be involved with most of these functions. The students were to record all job-tasks they experienced each day in the bake shop. This procedure required them to identify work experiences by name. it also provided a frequency count of tasks performed over a specific period of time.

Information which identifies the daily activity of students in prevocational, training, or employment sites is needed to determine if students are progressing appropriately with the skills outlined in their training plans.

The job-task reporting system initiated to keep track of student activity in our classroom bake shop has revealed itself to be versatile and useful in several ways.

1) It provides the teachers with current information from which to make decisions concerning related vocational instruction.
2) It gives support personel information to better coordinate and evaluate student activity at the job site.
3) It provides information as to the work activity experienced by a student on any given day.
4) It is a record of attendance and of time on the job.
5) It develops student responsibility to keeping work records.
6) It helps the student define worker functions as they are related to his/her work experience.

Using the Job-Task Reporting System

There are three components to the job-task reporting system: 1) a monthly calendar, 2) an enumerated list of worker functions, and 3) the summary report. (Refer to Figure 1 and Figure 2 throughout this section.)

USING THE CALENDAR:

At the beginning of the first full week of a month. each student is given a Calendar Report Form which includes an enumerated list of the job tasks outlined in the student's training plan. (Fig. 1)

We use a five-day week on our form as this emphasizes the school week. Off-campus workers sometimes opt to use an ordinary datebook in which they attach a list of their job tasks.

There are three types of information recorded on the calendar: the amount of time the student works each day; the exact time the student reports for work and the time he/she leaves the work site, and; the job tasks performed each day by the student. The calendar also becomes a record of attendance. If a student is absent from school, the reason for the absence is recorded on that date of the calendar report form.

In using the Calendar Report Form, the student records the time entering the work site in the space corresponding to the date. When work is completed, the student records the time he/she leaves and also records the code numbers, identified on the enumerated list of job tasks, of each job task experienced during the work period. Since only the numerals identifing specific job tasks have to be recorded instead of the words for the tasks, the record can be completed quickly. Supervisors are sometimes asked to initial the daily reports of the students. This helps to call attention to the work activity of the students for evaluation purposes as well as for training progress.

At the end of each week, the student summarizes the information recorded on the Calendar Report Form by transferring it to the Summary Report form.

The Summary Report involves charting of job-task codes, counting the frequency of each code number, and calculating the amount of time worked during the week. (Fig.2) Students obtain all of the information for the Summary Report from the Calendar Report Form.

Charting is initiated by having the students record the dates of the days worked in the left hand column. The next step is to identify code numbers of job tasks experienced that week. Students record only the code numbers of job tasks experienced. (Figure 2) They are asked to circle the code numbers on the list of job tasks the first time the code number is used each month. This provides a list of jobs in numerical order which makes for easy charting of frequencies. In subsequent weeks of the month, code numbers of job-tasks that are new to the student are added to the chart. These code numbers will of course be out of sequence; however, this helps emphasize work activity changes that are being experienced by the student.

Once code numbers are identified and recorded on the Summary Report, the student places an "X" in each square that identifies the coordinate positions of dates and the job-task codes recorded on the Calendar Report Form. The student then counts the marks in each column to determine the frequency for each job task. The two code numbers with the highest frequency are recorded by word identification in the column labeled Job Summary.

The next step in completing the Summary Report is to determine the amount of time worked. The Calendar Report Form requires the student to record only the time starting and ending work. The Summary Report requires students to determine the exact amount of time worked each day and then to calculate the total for the week and later for the entire month.

Advantages

There are several reasons for using this system of reporting. The forms are generic in nature which makes it possible to individualize them by simply adding each student's training plan. The system is simple, easy to interpret, and students learn to use it quickly. The calendar format provides a glaring identification of negligence in record keeping when information for a date is not recorded. This is not as easily identified when information is recorded in lists. The visual reminder encourages the students to maintain records and to develop the necessary habits that will be needed in record keeping as an adult. Because there is daily involvement in recording job tasks, students quickly become acquainted with names associated with their vocational experiences. When asked, "What do you do on your job?" They can list the job tasks common to them each day. But most importantly as a result of using the job-task reporting system, there is greater accountability for student progress as teachers and support personnel have current information that can be used to improve the vocational programs of students.

MONTH: February NAME: Dan

8:30 -9:30 2, 5, 1, 7 3	No School No Lab 4	8:30 - 9:15 1, 5 11:00 - 11:15 11 5	8:25 - 9:40 1, 18, 16, 5, 6 6	8:30 - 9:40 5, 9, 16 7
8:20 - 9:15 1, 5, 6, 11 10	8:30 - 9:40 5, 6, 1, 9 11:00 - 11:15 11 11	8:20 - 9:40 8, 9, 11, 6 12	8:20 - 9:40 1, 5, 8, 11 13	8:20 - 9:40 1, 5, 11 14
8:20 - 9:15 1, 5, 6 17	8:20 - 9:15 8, 9, 5 11:00 - 11:15 11 18	8:20 - 9:40 18, 15, 9, 5 11:00 - 11:15 11 19	8:20 - 9:40 1, 5, 8, 11 20	8:20 - 9:40 1, 5, 11 21
8:30 - 9:15 25, 1, 7, 6 24	8:30 - 9:40 5, 6, 18, 9 25	8:25 - 9:40 8, 9, 5, 6 26	8:20 - 9:40 5, 9, 11 27	8:20 - 9:40 8, 9, 5, 6 28

JOB TASKS FOR THE CORNY COOKIE CORNER

[✓ 1.] CANDY MAKING
[✓ 2.] POP CORN
3. MEASURE FLOUR
4. MEASURE SUGAR
[✓ 5.] WASH DISHES
[✓ 6.] DRY DISHES
[✓ 7.] GET/FOLD TOWELS
8. MIX COOKIES
[✓ 9.] SHAPE COOKIES
10 . RECIPE MEASUREMENT (DRY INGREDIENTS)
[✓ 11.] CLEAN UP
12. SET UP
13. BOOKKEEPING
14. SET UP ORDERS
15. MIX BREAD
[✓ 16.] KNEAD/SHAPE BREAD
17. MONITOR OVEN
[✓ 18.] PACKAGE CORN
19. MAKE DELIVERIES
20. GO OUT ON SALES
21. CLERK GAMES
22. COMPLETE PAYROLL
23. DO BANKING
24. INVENTORY
25. COMPLETE SHOPPING

(Figure 1)

MONTH *February* JOB SITE *Bake Shop* WORKER *Dan*

DATE	JOB-TASK CODE NUMBERS												WORKING TIME		JOBS WORKED MOST
Feb. 3- 7	1	2	5	6	7	9	11	16	18	8	15	25	hrs.	min	1. Candy making
3	X	X	X		X								1hr		
4														0	2. washing dishes
5	X		X				X						1hr		
6	X		X	X				X	X				1hr	15 min	
7			X			X		X					1hr	10 min	
TOTAL	3	1	4	1	1	1	1	2	1				4hr	25min	
Feb 10 – 14															1. Clean up
10	X		X	X			X							55	
11	X		X	X		X	X						1hr	10 min	2. Candy making and washing Dishes
12				X		X	X			X			1hr	35 min	
13	X		X				X			X			1hr	20 min	
14	Y		X				X						1hr	20 min	
TOTAL	4		4	3		2	5			2			4hr 140min -6hr 20min		
Feb. 17 - 21															1. washing dishes
17	X		X	X										55min	
18			X			X	X			X			1hr	10 min	
19			X			X	X		X		X		1hr	35 min	11. Clean up
20	X		X				X			X			1hr	20 min	
21	X		X				X						1hr	20 min	
TOTAL	3	0	5	1	0	2	4	0	1	2	1		4hr 140min= 6hr. 20min		
Feb. 24 - 28															1. washing dishes
24	X			X	X							X		45min.	2. Drying dishes
25			X	X		X			X				1hr	10 min	11. Clean up
26			X	X		X				X			1hr	15 min	
27			X			X	X						1hr	20 min	
28			X	X		X				X			1hr	20 min	
TOTAL	1	0	4	4	1	4	1	0	1	2	0	1	4hr 110 = 5hr 50 min		
FOR MONTH	11	1	17	9	2	9	11	2	3	6	1	1	21hr 115min = 22hr 55min		

(Figure 2)

MONTH: NAME:

JOB TASKS FOR THE CORNY COOKIE CORNER

1. CANDY MAKING
2. POP CORN
3. MEASURE FLOUR
4. MEASURE SUGAR
5. WASH DISHES
6. DRY DISHES
7. GET/FOLD TOWELS
8. MIX COOKIES
9. SHAPE COOKIES
10. RECIPE MEASUREMENT (DRY INGREDIENTS)
11. CLEAN UP
12. SET UP
13. BOOKKEEPING
14. SET UP ORDERS
15. MIX BREAD
16. KNEAD/SHAPE BREAD
17. MONITOR OVEN
18. PACKAGE CORN
19. MAKE DELIVERIES
20. GO OUT ON SALES
21. CLERK GAMES
22. COMPLETE PAYROLL
23. DO BANKING
24. INVENTORY
25. COMPLETE SHOPPING

6.

MONTH ______________________ JOB SITE __________________ WORKER ______________________

DATE	JOB-TASK CODE NUMBERS																					WORKING TIME	JOBS WORKED MOST
TOTAL																								
TOTAL																								
TOTAL																								
TOTAL FOR MONTH																								

STUDENT: JOB SITE: DATE:

RATINGS

A	GROOMED PROPERLY	5	4	3	2	1	NOT GROOMED PROPERLY
B	DRESSED APPROPRIATELY	5	4	3	2	1	INAPPROPRIATE DRESS
C	REQUESTS WORK ASSIGNMENT	5	4	3	2	1	MUST BE TOLD TO GET WORK ASSIGNMENT
D	PREPARES SELF FOR WORK ASSIGNMENT (wash hands, etc.	5	4	3	2	1	DOES NOT FOLLOW WORK PREPARATION PROCEDURES
E	INITIATES WORK ASSIGNMENT	5	4	3	2	1	WORKS ONLY WHEN PROMPTED
F	WORKS INDEPENDENTLY (attends physically and visually to task)	5	4	3	2	1	IDLE: (ceases physically to work at task)
G	MAINTAINS MATERIALS (locates and gets materials for task completion)	5	4	3	[illegible]	1	FAILS TO GET MATERIALS AS NEEDED
H	KEEPS WORK AREA IN ORDER (organizes area, discards trash, etc.)	5	4	3	2	1	LEAVES WORK AREA MESSY AND DISORGANIZED
I	COMPLETES JOB TASK IN AN APPROPRIATE AMOUNT OF TIME	5	4	3	2	1	WORK INCOMPLETE (substantially behind/slow)
J	FINDS WORK TO DO AFTER MAIN JOB TASK IS COMPLETED	5	4	3	2	1	REMAINS IDLE UNTIL DIRECTED TO NEW TASK
K	WORKS-TALKS (attends physically to task while listening and talking with others)	5	4	3	2	1	STOPS WORKING WHEN LISTENING OR TALKING WITH OTHERS
L	GIVES HELP (provides assistance to others while listening and talking with others)	5	4	3	2	1	INTERRUPTS AND/OR INTERFERES WITH CO-WORKERS JOB TASKS
M	RECEIVES HELP FROM PEERS (co-workers assist in completion of task: advice, problem solving)	5	4	3	2	1	WILL NOT ACCEPT HELP FROM PEERS/ INAPPROPRIATE REMARKS OR ACTIONS WHEN ASSISTED
N	RECEIVES HELP FROM SUPERVISORS APPROPRIATELY (training, advice, etc.)	5	4	3	2	1	REACTS INAPPROPRIATELY TO ASSISTANCE FROM SUPERVISORS
O	ASKS FOR HELP APPROPRIATELY (in proper manner and when necessary)	5	4	3	2	1	FAILS TO REQUEST HELP WHEN NECESSARY OR SEEKS HELP WHEN NOT NECESSARY
P	FOLLOWS SAFETY RULES AND PROCEDURES	5	4	3	2	1	DISREGARDS SAFETY RULES AND PROCEDURES

Record examples of behaviors on back of this form. Make instructional and training recommendations when appropriate.

THE CORNY COOKIE CORNER

We make several food items in our Bake Shop at school. Our jobs in the shop give us experience in the world of work. You can help us by buying our products because we then have things to make. Would you like to order from the list below?

BREAD ORDERS:

NAME ______________________________ Delivery Date ______________

ADDRESS ___________________________

Bread (only Thursday and Friday) $1.50

Number of Loaves __________ TOTAL ______________

****

COOKIE ORDERS: Delivery Date ______________

$1.00	PEANUT BUTTER	__________	dozen	______________
$1.25	GRANOLA	__________	dozen	______________
$1.00	SUGAR	__________	dozen	______________
$1.25	DOUBLE CHOC.	__________	dozen	______________
$1.25	MIXED (3 of each)	__________	dozen	

TOTAL ______________

****

CARAMEL CORN: small bag $.50 large bag $1.00

Small bag ____________

Large bag ____________

TOTAL ______________

COMPLETE ORDER TOTAL ______________

****

YOU MAY CALL IN YOUR ORDER

Telephone # 422-3853

Department of Special Education
Work Experience Program
North Fayette County Community Schools
Jr. High Building

PRESENTATION REFERENCE NUMBER 80
PRESENTER: BONNIE SCHMALLE
NORTH FAYETTE COMMUNITY SCHOOLS
P. O. BOX 73
WEST UNION, IOWA 52175

COMPLETE CONFERENCE PAPER:
COULD THE CORNY COOKIE CORNER
WORK IN YOUR SCHOOL?

Bonnie Schmalle
North Fayette Commnunity Schools
P. O. Box 73
West Union, Iowa 52175

Could the Corny Cookie Corner Work in Your School? Vocational, Affective, and Cognitive Programming for Rural Special Education Students

The Corny Cookie Corner has become a valuable curricular component in the vocational programming sequence offered to special education students in our rural school district. This classroom bake shop produces bread, cookies, and caramel corn. The products are sold by the students to customers throughout the community and at basketball games. The profits provide wages for students and financial support for their vocational club projects. But most importantly, it a laboratory rich in the application of realistic vocational, cognitive, and social experiences through which the students can prepare for the real world.

The primary activities of the Corny Cookie Corner take place during a scheduled laboratory. Work activity simulates actual on-the-job experience. Students are trained to carry out assignments independently and as team members. Besides the actual baking activities, the students must go out on sales, package products, make deliveries, collect money and make change, maintain supplies through grocery purchases, keep accurate financial records, perform maintenance and clean-up tasks, and keep personal records for work completed and time on the job.

The decision to incorporate a student-operated business as a component of our career education sequence came about as a result of our staff's concern for the limited vocational opportunities available to our students. We wanted a program component that would prepare students so that they could more fully benefit from a continuum of commnuity-based vocational training and employment experiences.

After studying the problems and factors involved, we formulated our project goals. It was determined that our primary goal would be to help students develop appropriate jobsmanship skills and work attitudes prior to vocational placement in off-campus sites. Secondly, the project was to become a component of the prevocational assessment of students and a continuous source for evaluating their application of skills. Thirdly, the project was to be a complement and not a replacement of the basic objectives of the curriculum.

A bake shop was chosen for the project because it could utilize available facilities, emphasized application of numerous skills and jobs, kept purchasing of production needs locally centered, could be regulated according to demands of school schedules and days in operation, and production and products could be determined by customer demand.

Several factors affected our decision. Foremost was administrative support. Although support services and consultants are provided to special education programs in our state by area education agencies, the special education teachers in our district are under contract by the local school district. Our building principal carries out the administrative responsibilities and makes the operating decisions which affect programs. The autonomy given to teachers was reserved by legislative mandates (i.e., P.L.94-142), general school regulations, funding, and by the principal's belief that innovative proposals must be educationally sound and that the instructional staff was dedicated and willing to meet the demands of the project. The discussion that follows will emphasize program applications.

Rural programs are characterized by heterogeneous populations, not only by disability served within a class, but also by age-span. It is not uncommon to find multicategorical resource and/or self-contained classes that serve students that are age-appropriate to grades seven through twelve. The program involved in this project is a self-contained class with integration and serves students that are fourteen to twenty-one years of age that have mild mental disabilities. Students classified LD and BD from other classes have also been scheduled into the lab.

The project operation involves activities requiring a variety of skills and developmental stages. This program characteristic works to be effective in dealing with the age-span as well as the diverse needs of the students in the program. The daily activities of students in the bake shop provide valuable information for curriculum-based assessments. The instructional needs in reading, math, communications, world of work, problem-solving, social skills, and life skill applications can be individualized from these assessments.

Although the instructional program for our students emphasized the development of vocational, personal, and social adequacy, our staff felt the current delivery system was deficient. The students needed realistic experiences in which they could apply, practice, and develop appropriate jobsmanship skills and work attitudes prior to vocational placement in off-campus sites.

Could the activities of a student-operated business more appropriately and effectively satisfy the career education needs of the students? We were confident that we were moving in the right direction then and are totally convinced now. The life centered career education work of Brolin (1978) has been a major source of direction for our program. Brolin's philosophy maintains that career development requires a substantial experiential component and that most people learn best with hands-on activity. (Brolin, 1983) Our students have many hands-on activities in the project, and at the same time the activities involve the application of affective skills and general employability skills which Brolin (1983) claims are directly related to job functioning.

Evaluation and assessment are essential components of the project. Current literature and legislation (i.e., Carl D. Perkins Vocational Education Act of 1984, P.L. 98-524) emphasize the responsibility of special education programs in providing vocational assessment.

Three of the four essential types of vocational evaluation tools--vocational aptitude, interest inventories, and work samples, have been extensively criticized due to lack of standardization, poor predictability and limited generality. (Brolin, 1982) The fourth type of evaluation technique is situational assessment and cannot be standardized but does provide content validity. It relies exclusively on observation of the workers as they work, giving information about behaviors under realistic conditions. (Glascoe & Levy, 1985) It is evident that students must be involved with a work evaluation process which includes hands-on work evaluation. (Fardig, Algozzine, Schwartz, Hensel, Westling, 1985)

Complete assessment must include more than situational observation. However, students who are referred for vocational assessment services too early do not have sufficient motivation or focus on career decision making . (Ianacone & Leconte,1986) The experiences of the bake shop together with related instruction help provide experiences that work to kindle interest and motivation of students in making career choices resulting in more accurate assessment results.

The employment limitations that characterize rural areas present a major concern to special educators responsible for promoting community-based vocational experiences for handicapped students. Students in off-campus positions are expected to have basic jobsmanship skills. Employers expect to have individuals assigned to them that can work. Students must have proper behaviors prior to off-campus experience. They must also be able to adjust to diversity within their jobs as employers of small businesses expect workers to do many tasks. The reputation of a program rests on effective vocational placement of students in the community. A dissatisfied employer may mean a future work site lost to the school program.

Teachers and work experience coordinators must be able to provide employers with accurate information concerning the assets and liabilities of students being placed. They must know how the student learns, rate of work, supervisory needs, and training techniques and methods of instruction that work with the student being placed. Through observation of students in realistic work experiences, placement information is more accurately defined. Combined with work site selection based on student preferences, placement decisions result in greater employer satisfaction and improved training opportunities for students.

The inclusion of a student-operated business in the pre-vocational experiences offered to junior high and senior high school handicapped students provides a bridge between the school and community-based vocational experiences. It can bring to the program something that regular course offerings do not. It can help make the special in special education meaningful. It provides students with hands-on experiences in which basic jobsmanship skills, attitudes, and abilities can be developed and assessed. It provides students with a base from which they can evaluate and test their perceptions of the world of work while developing understanding of concepts relating to job descriptions, preference of tasks, environments, and working conditions. It provides students with realistic activity which can be practiced and generalized to daily living skills.

Rural schools have distinct educational environments and unique strengths and weaknesses. Successful programs exist and they are characterized by strong instructional staff, strong administrative support, effective communication on the part of the staff, and curriculum based on the development of independent life skills and career-related preparation. (Clark & White, 1985) Success is not tied strongly to outstanding facilities, to transportation, or expensive teaching and training materials but rather to intangible factors surrounding the staff and its committment to the goals of providing quality career education to handicapped students.

A student-operated business can use the rural setting to its benefit. This project is an example of program development that demonstrates how a student-operated business as a curricurlar component in special education can be molded by rural special educators to the unique needs and resources of their students and district.

We have found our Corny Cookie Corner to be a mecca for evaluative information and for the application of vocational, cognitive, and affective skills. It is a curricular component that helps define instructional needs of students, directs instruction through application, and enables skill development through extensive practice. It is a program that works in a rural special education setting.

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Abstract

"Assessment and Staffing of Infants Using a Transdisciplinary Team Approach"

Principal Presentor: Deana M. Buck, Training Consultant

Additional Presentor: Lisa H. Rogers, Training Consultant
Child Development Resources, Inc.
Outreach Project
P.O. Box 299
Lightfoot, VA 23090
(804) 565-0303

Topical Area: Assessment, Diagnosis

Goal: The participants will become familiar with the transdisciplinary approach to infant assessment and staffing in order to provide coordinated, comprehensive service to young children and their families.

Learning Objectives:

1. To identify the four basic components of team assessment.
2. To identify the six basic components of team staffing.
3. To comprehend the purpose of and procedures for each of these components.
4. To compare and contrast the transdisciplinary assessment and staffing process to the learner's current process.

This workshop will describe the transdisciplinary approach to providing services to children with special needs and their families. A discussion of the theory behind transdisciplinary teams will be followed by a description of the process of assessment and staffing. Through role release and exchange, members of the team cross over their disciplinary boundaries to provide comprehensive services via case management services.

An actual assessment and staffing will be demonstrated via videotape, and participants will receive a checklist and worksheet to follow the process.

Mr. Jonathan A. Jones
Director/Principal
Project SOAR
Augusta, Georgia

Project Success Oriented Achievement Realized
P. O. Box 388 Balsam, North Carolina 28707
704-456-3435

Abstract: Successful Study Skills/Life Skills Formation

Life is a series of challenges. To be a successful adult, a young person must acquire the life skills necessary to meet those challenges. Critical life skills include motivation, concentration, time management, organization, memorization, observation, communication and problem-solving. These skills can be taught in the classroom as study skills or in life as a part of experiential learning opportunities.

This seminar is designed for parents and teachers and provides the opportunity to explore the concepts related to forming critical life skills. An approach is taken that emphasizes individual differences in developing successful strategies for skills formation while recognizing certain group generalities. Particular emphasis is focused on teaching study skills and communication skills in Middle School and High School classrooms. The importance of consistency and goal-setting between the home - school team is discussed. This discussion is based on a highly successful Communications course offered to seventh and eleventh graders in a southeast Georgia community. This same course experienced equal success in the mountains of Western North Carolina under a different format. The life skills/study skills were paired with specific experiential learning opportunities as part of an "outdoor classroom" program for "at risk" youth in Haywood County, North Carolina. Transference to classroom and home was accomplished by an in-school counseling program. Implications of this model are discussed as well.

Motivation and concentration are presented as fundamental concepts that must be developed before successful learning and/or living can take place. Organizational skills and memory skills can then be built on this foundation. At this level individualization is critical as there are a multitude of approaches to learning these skills. The successful approach is the one based on a student's learning strengths. Thus, analysis of student strengths/weaknesses will be discussed. Once these first four skills areas are being formed a general study skills strategy such as SQ3R can be developed. This strategy relies on goal-setting and teaches patterning for successful problem-solving techniques in life. The concepts of note-taking and test-taking are then discussed as they relate to study skills. Observational skills and communication skills are analyzed as they pertain to these last two concepts.

This presentation can be conducted in one hour, but would probably better be presented in a period of one and one-half hours. The primary presenter will be Mr. Jonathan A. Jones, Principal of Westminster School in Augusta, Georgia and Director of Project SOAR based out of Waynesville, North Carolina. He has more than ten years experience in both secondary education and outdoor education. The general conference topical areas to be addressed are "Curriculum and Instruction" and "Lifelong Learning."

ABSTRACT

TITLE: Speech - Language Pathologists: Where are they?

Presenters: Susan Kimmerly
Vermont Department of Education

Kathy Finsley
West Virginia Department of Education

TOPIC: Personnel Recruitment and Retention

This presentation will address the resolution of the critical shortage of public school speech - language pathologists in rural states. The presenters are consultants for speech, language and hearing in their respective State Departments of Education, representing Vermont and West Virginia. In these positions, they are both confronted with severe personnel shortages and have thus been working together to resolve their personnel problems.

This session will provide participants with an overview of the speech - language pathologist shortage, address possible solutions to this problem, report on the progress of states actively working to resolve the problem, and will provide a forum for discussion of other topics raised by the participants.

Following is an outline of the topics to be raised.

I. Overview

  A. Trends of personnel needs and shortages in West Virginia and Vermont.

  B. Longitudinal data on reported vacancies and needs.

    1. Vermont and West Virginia

    2. National statistics

II. Legal issues concerning the lack of speech and language services including specific cases from Vermont and West Virginia.

III. State Initiatives

   A. Working with higher education institutions.

      1. part-time programs

      2. inservice training

   B. Upgrading certification standards

      1. rationale

      2. qualified supervisors

   C. Attempts to increase salaries

IV. Innovative Service Delivery Models

   A. State efforts to expand service delivery models.

      1. develop teacher consulation skills

      2. encourage integration of language awareness into regular education programs

   B. Contracted Services

   C. Local attempts to provide speech and language services without certified personnel.

V. Local Initiatives

The presenters will encourage audience participation, so a round table discussion format is preferred. However, the presentation could easily be modified to conform to a traditional lecture.

CO-PRESENTER

Kathy Finsley
Coordinator of Communication Disorders
Department of Education
Capitol Complex Building #6
Charleston, West Virginia 25305
Business Phone - (304) - 348-2696
Home Phone - (304) - 925-0985

AMERICAN FOUNDATION FOR THE BLIND, INC.

Frank Simpson
Kathleen Mary Huebner
American Foundation for the Blind
New York, NY 10011

Collaborative Planning: Transition from School to Work

The project outcome is the development of collaborative working relationships among parents, consumers, special education and personnel that will facilitate the transition of blind and visually handicapped students from school to work. This national training project is in the final year of a three year cycle. Four team members from each state, Washington, D.C., and the U.S.Virgin Islands were selected to be trained at a leadership institute on the development of collaborative planning strategies relative to transition needs. Each state transition team consisted of leadership personnel representing rehabilitation, education, adult role models, and parents. During the training institute each team worked through a prescribed process for collaborative planning culminating in the development of a state action plan. Although the action plans varied, needs commonly identified can be categorized as follows:

1. Further team development including the addition of members to represent employers and private agencies.
2. Initiation of state-wide studies to document transition needs of the target population.
3. Further identification of existing resources and agreements.
4. Program development to provide training opportunities for target population.
5. Development of a more effective state-wide communication system for sharing information.
6. Funding for further team development; state wide-meetings on transitional planning; and program development.

15 WEST 16TH STREET, NEW YORK, NEW YORK 10011
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THE LEGACY OF HELEN KELLER

Helen Keller inspired millions throughout the world by her triumph over deafness and blindness. She used her personal miracle of communication to open the world for other blind and deaf-blind people. She appeared before legislatures, gave lectures, wrote articles, and above all, made herself an example of what a severely handicapped person can accomplish. When the American Foundation for the Blind was established in 1921, she found in it a national organization that shared her purpose. From 1924 until her death in 1968, Miss Keller was a member of the Foundation staff, serving as counselor on national and international relations. It was also in 1924 that she began her campaign to build an endowment fund for the Foundation. Through this fund and the kindness of present benefactors her work is continued.

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Turner Broadcasting System, Inc.
Atlanta, Georgia

DONALD H. WEDEWER
Division of Blind Services
Tallahassee, Florida

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WILLIAM F. GALLAGHER
Executive Director

Upon request the project staff provided technical assistance to teams through telephone contacts, on-site consultations and mail. Three training manuals developed by project staff have been disseminated to all team members. These manuals are under the major title heading of Collaborative Planning: Transition from School to Work with subheadings as follows:

1. Training Manual #1: Developing Your State Team: Why and How
2. Training Manual #2: Programs in Practice
3. Training Manual #3: Training Ideas, Strategies and Activities

During the first two years the project staff coordinated training, provided technical assistance, and developed the training manuals.

During the third year of the project state teams developed proposals for state training activities, and submitted them to the project staff for review. Approximately 70% of the transition teams have submitted individual state plans for training activities, primarily in one of four categories: (1) development of support groups; (2) individual transition plans; (3) newsletter/publication; and (4) conference/workshop. State transition teams will receive mini-grants to support their approved training activity. Technical assistance continues and on-site visitations are planned.

The presentation will describe the project which takes the national priority of transition and through team development results in a state training activity. Also, time will be provided for sharing many of the strategies state transition teams have developed for activating and implementing collaborative planning to facilitate the transition of blind/visually impaired youth from school to work. The model is replicable and applicable across disability groups. The presentation will emphasize strategies utilized in rural states.

The attached flow chart provides a graphic depiction of this national training project.

Submitted by:

Dr. Kathleen Huebner
National Consultant in Education/
Assistant Director of National Consultants

Mr. Frank Simpson F.S.
National Consultant on Employment

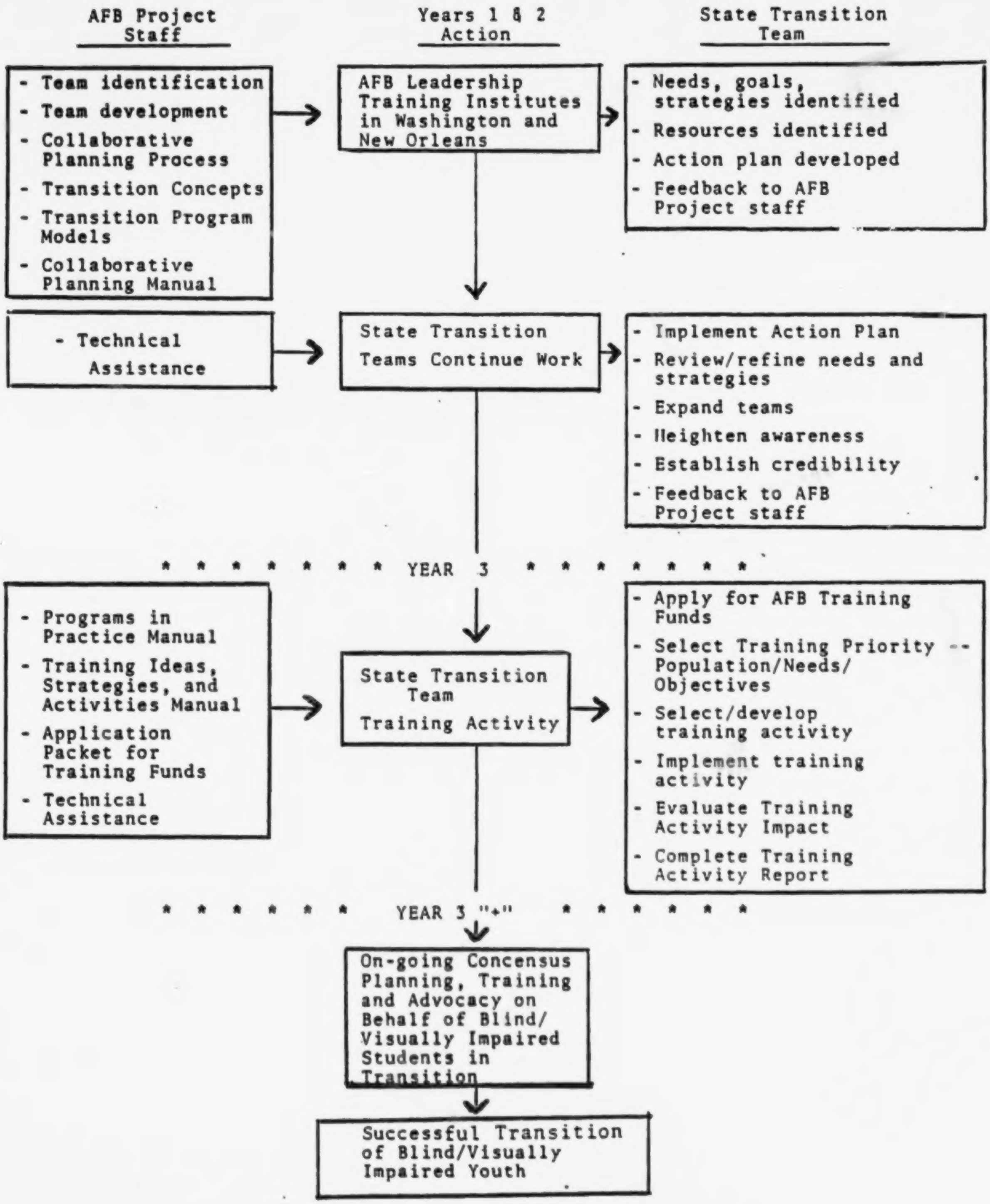
General Topical Areas

for

Collaborative Planning:
Transition from School to Work

- Transition Programs
- Interagency Collaboration
- Family-Professional Relationships
- Community Partnerships

AFB Transition Training Project on Transition of Blind/Visually Impaired Students from School to Work



AFB Project Staff

Years 1 & 2 Action

State Transition Team

- Team identification
- Team development
- Collaborative Planning Process
- Transition Concepts
- Transition Program Models
- Collaborative Planning Manual

→ AFB Leadership Training Institutes in Washington and New Orleans →

- Needs, goals, strategies identified
- Resources identified
- Action plan developed
- Feedback to AFB Project staff

- Technical Assistance

→ State Transition Teams Continue Work →

- Implement Action Plan
- Review/refine needs and strategies
- Expand teams
- Heighten awareness
- Establish credibility
- Feedback to AFB Project staff

* * * * * * * YEAR 3 * * * * * * *

- Programs in Practice Manual
- Training Ideas, Strategies, and Activities Manual
- Application Packet for Training Funds
- Technical Assistance

→ State Transition Team Training Activity →

- Apply for AFB Training Funds
- Select Training Priority -- Population/Needs/Objectives
- Select/develop training activity
- Implement training activity
- Evaluate Training Activity Impact
- Complete Training Activity Report

* * * * * * YEAR 3 "+" * * * * * *

On-going Concensus Planning, Training and Advocacy on Behalf of Blind/Visually Impaired Students in Transition

Successful Transition of Blind/Visually Impaired Youth

TITLE: "Evaluating A Model for Special Education Programs in Rural Areas"

EVALUATING SPECIAL EDUCATION
PROGRAMS IN RURAL AREAS

Program evaluation continues to be a major problem within the area of special education. In fact, evaluation is probably of greater concern today in American public education than at any other time in history. P.L. 94-142 mandates program evaluation. This problem is especially troublesome for those school system in rural or sparcely populated areas. This proposed presentation will focus on three major areas of program evaluation (1) focusing and the initial planning, (2) information collection, planning and development of an instrument, and (3) analyzing results, reporting the findings, and taking action. In addition, this presentation wil center on such topics as why evaluate your special education program, identifying the purpose of an evaluation, and identifying possible barriers and bridges that could interfere with or in a program evaluation.

The panel presentation will be designed in an answer - question format with participation from the audience highly encouraged. Handouts will be available for the participants which will aid then is a evaluating various components of their individual special education programs.

The program will review the step by step procedures used in a program evalution design including such issues as the sampling plan, instrumentation development, reporting findings to school personnel, and the utilization of results in program improvement and/or program development.

PROGRAM PARTICIPANTS

1. H. Booney Vance, Research Director
   Center for Early Childhood Learning & Development
   East Tennessee State University
   Johnson City, TN 37614-0002

2. Wesley Brown, Director
   Center for Excellence
   Center for Early Childhood Learning & Development
   East Tennessee State University
   Johnson City, TN 37614-0002

3. Norman Hankins, Chairperson
   Department of Human Developmentt & Learning
   East Tennessee State University
   Johnson City, TN 37614-0002

Dr. Rhonda Folio
Professor/Co-Director ETIPS Project
Special Education
Box 5074
Tennessee Technological University
Cookeville, TN 38505

Dr. Dean Richey
Professor/Co-Director ETIPS Project
Special Education
Box 5074
Tennessee Technological University
Cookeville, TN 38505

"ETIPS MODEL FOR EARLY INTERVENTION"

Parents are key teachers of their very young at-risk or handicapped children. Those in rural, sparsely populated or isolated regions often do not have access to adequate early intervention services. If services are available, distance in rural regions prevents frequent contact with early intervention service providers.

Parents of young handicapped infants and toddlers are willing to teach their young children developmental skills, but often lack the knowledge, skills, and confidence to structure a teaching sequence.

One effective method of reaching isolated parents is through television. Research has indicated that this media, accompanied by other aids and resources, can be very useful in the delivery of service to isolated families. The major goal of the Educational Television Intervention Programs Project (ETIPS) has been to develop, field test and disseminate a supplementary model for early intervention in rural isolated regions. The fundamental biases of the ETIPS model are as follows:

- Parents can be effective at early intervention if good examples and techniques are demonstrated.
- Parents are receptive to ideas modeled by other parents.
- Television is an effective means for demonstrating and teaching parents skills.
- Television instruction, when accompanied by print materials as a follow-up to viewing, is an effective means for assisting parents.
- Parents are effective trainers of other parents.
- Public television stations and early intervention service providers can team up to provide training and contact with rural, isolated families of young handicapped or at-risk children.

The major products of the ETIPS model include the development, field testing, and dissemination of the following:

- 30 fifteen minute videos of skills that infants and toddlers typically develop between birth and three years of age including gross and fine motor, language and cognitive skills.
- The 30 programs illustrate each skill and show parents teaching typically developing and handicapped/high risk infants and toddlers.

The thirty programs in the video series called "Stepping Stones: Pathways To Early Development" include:

Program 1	INTRODUCTION - 30 minute show telling how, why, when, and a look at a variety of skills infants and toddlers develop from birth to 36 months.
Program 2	LOOKING AND FIXATING - learning to use your eyes.
Program 3	STRETCHING AND MOVING BODY PARTS - importance of moving.
Program 4	TRACKING - following objects with the eyes and head.
Program 5	HEAD AND TRUNK CONTROL - beginning to gain strength for sitting.
Program 6	BABBLING AND VOCALIZING - getting ready to talk.
Program 7	ROLLING OVER AND PUSHING UP - beginning to get around.
Program 8	ATTENDING AND INSPECTING - looking with a purpose.
Program 9	REACHING AND GRASPING - using eyes and hands together.
Program 10	EATING AND DRINKING - practicing using utensils.
Program 11	SITTING - learning to sit up.
Program 12	IMITATE SOUNDS AND ACTIONS - learning by seeing and doing.
Program 13	MIDLINE AND TRANSFER - moving objects from one hand to another.
Program 14	OBJECT PERMANENCE - learning that objects out of view have not disappeared.
Program 15	CRAWLING AND CREEPING - practicing moving on hands and knees.
Program 16	STACKING, BUILDING AND KNOCKING OVER - using eyes and hands to build.
Program 17	STANDING UP - gaining balance for walking.
Program 18	SHAPES, FORMBOARDS - figuring out puzzles.
Program 19	CRUISING AND TODDLING - taking those first steps.
Program 20	PLAYING AND SOCIALIZING WITH ADULTS - learning how to interact effectively.
Program 21	PLACING AND REMOVING OBJECTS - putting in and taking out objects.
Program 22	MAKING TOYS WORK - learning to push and pull, squeeze and wind toys.
Program 23	SCRIBBLING - gaining control over arms and hands.
Program 24	LOOKING AND INTERACTING WITH BOOKS - beginning to look and listen.
Program 25	CLIMBING AND RUNNING - moving with speed.
Program 26	NAMING OBJECTS AND PEOPLE - talking more and more.
Program 27	JUMPING - getting the body off the ground.
Program 28	USING OBJECTS AS MEANS/ENDS - adapting to reach something.
Program 29	THROWING AND CATCHING - getting ready for games.
Program 30	CONCLUSION - 30 minute review of the programs--plans for the future.

A Parent Guide accompanies each video. The guides are four pages each and are designed to compliment each program by defining the skill, telling why it is important for the child to develop, describing how the skill occurs, teaching techniques at home, and making homemade materials. Follow-up materials help reinforce what was seen in each program.

A Child Progress Chart is also provided for parents to document their child's progress. The chart divides each skill into four or five sub-components of each skill (the sequences shown and described in the video segment). Parents can then take their child through each stage of the skill and document the child's achievement.

Parents have found the print materials to be valuable tools in assisting them with teaching their child. They were evaluated generally as informative, clear, easily readable, and helped them remember what was seen in each video.

A User's Guide was developed for service providers and other professionals who would be using the series. The Guide contains relevant information concerning the background material for the scope, nature, and rationale for the ETIPS model and products. Additionally, uses of the materials are described. Strategies for assisting parents in rural areas are suggested along with a description of each video, the parent guides, child progress chart, and Teacher's guide are included. Additionally, strategies for connecting up with public television as a vehicle for assisting in early intervention are discussed. The strategies used is the ETIPS model were described. The User's Guide is designed as a flexible tool for service providers to use within their own programs and serves as a resource.

Linking and Networking with Public Television - A major component of the ETIPS model is the linking of service providers with public television. The majority of public television stations are interested in providing quality programming to the viewership in the broadcast regions. WCTE-TV, a public television station serving the Upper Cumberland Region of Middle Tennessee, assisted with the development of the thirty videos in the Stepping Stones series. They also broadcasted the series so that families with young at-risk or handicapped infants and toddlers could view the thirty programs. This was implemented to test out the ETIPS model and also have parents and professionals evaluate the videos and accompanying print materials.

ETIPS FIELD TEST EVALUATION DESIGN - The ETIPS field test was conducted in two, four-month broadcasting cycles. The first cycle was May through August, 1986, and the primary target audience included 12 to 15 families with children who would benefit from the lower level skill programs and resources (Programs 1 - 15). The second cycle was September through December, 1986, and included as primary targets, the remaining families with children with the higher level skills, to reach the goal of twenty-five total primary target families. During the second cycle, several secondary target groups were added to the evaluation effort, including the groups noted below.

In general, the purpose of the evaluation/assessment effort was to determine the usefulness and effectiveness of the ETIPS Program as a supplement to, or first level, early intervention service delivery and as to examine its impact on broader audiences having interest in the development of young children (pre-natal classes, high school child development classes, parent groups, infant care centers and others).

Specifically, the ETIPS evaluation plan called for the collection of information in five domains, including 1) child change, 2) parent confidence, 3) parent skills, 4) parent knowledge (specific and general), and 5) product quality. Each of these domains is described below and the manner in which data was collected is described.

Child Change: Project staff recognize that pre and post measures of child change are of very limited usefulness in an effort such as ours, as a result of the duration of the field test and the focus being more on family/parent efforts. However, each target child will be assessed prior to the beginning of his/her family's broadcast cycle, and again at the conclusion of the cycle. The pre-assessment will be used to help Project staff and families establish what programs and materials will be prescribed for their use. As per the grant specification, the Peabody Developmental Motor Scales and the Uzgiris and Hunt Scales of Infant Psychological Development were the primary measures.

The post assessment will be of some use in determining any domain specific as overall developmental change in target children's abilities. Dr. Folio and Dr. Richey, Project Co-Directors, were responsible for administering interpreting and writing developmental assessments and for representing the assessment findings in establishing prescriptions.

Parent Confidence and General Knowledge: It is important to determine the extent to which the field test activities have influenced parents' attitudes/feelings/beliefs about their confidence in a variety of matters related to their special-needs or at-risk young child. It is also important to ascertain the extent to which participation in the ETIPS Project might have increased target families general knowledge of child development. A questionnaire consisting of forty (40) statements (15 general knowledge and 25 confidence/attitude), utilizing a Likert-type scale (5 points from Strongly Disagree to Strongly Agree will be used to evaluate these domains. This instrument will be administered pre and post by the parent cadre member assigned to the family. Following examples, each statement will be read orally to the participating family members individually.

Parent Skill: One intent of the ETIPS material and intervention strategy is to help family members improve their skills with regard to planning and implementing instruction for their child. Assessment in this domain will be accomplished by having the parent cadre member, during their wekkly or bi-weekly visit to the home, make these determinations; 1) can the caregiver name the skill and do they know, generally, what it is, 2) can the caregiver name and in general, tell about a new teaching tactic/activity which they are using, 3) can the caregiver demonstrate the tactic (partially) without the child, 4) can the caregiver demonstrate the tactic fully and accurately (not with the child), 5) can the caregiver fully and accurately demonstrate the tactic with the child, and 6) can the caregiver demonstrate with the child another tactic for the same skill (expansion and generalization). The parent cadre member will record this information for each visit during which the family is working on more than one skill at a given time, then the procedure will be follwed for each. Point values (1 - 6) will be assigned by the parent cadre staff at a later date and upon review and consideration of their notes and observations.

Parent Knowledge: The fourth domain of evaluation relates to change in families specific knowledge about the prescribed skills on which they are working. For each of the twenty-eight skills, there will be three specific items to assess knowledge. These statements will be read by the parent staff member during their weekly or bi-weekly visits and will be administered only for the skills on which the family is working with their child. Statements will be read under informal, non-threatening circumstances and will be five-point scaled. (Strongly Disagree to Strongly Agree). Specific knowledge items will be administered the week after the participating family member has viewed the program twice and has been assisted by staff in understanding and using the related Guide.

Product Quality: The fifth and last domain of evaluation has to do with the quality and usefulness of the products (t.v. program and guides). This is an on-going effort and parent staff members will collect from target families this information through a brief interview.

Twenty-five families agreed to participate in the evaluation phase of the project. Twenty of these families had children with identifiable handicaps and five families with children meeting criterion for "at-risk".

The co-directors of the project assessed the development of the children and prescribed the appropriate skill lessons to be viewed by the family. These families were visited regularly by a member of the ETIPS parent cadre to collect evaluation materials, as well as offer support and resources. Parents completed evaluations to measure product quality, change in confidence and acquisition of knowledge. Parents also read and evaluated the skills guides for each program and completed the Child Progress Chart.

The secondary target group was made up of two center-based programs for handicapped children, a program for young teen mothers who have dropped out of school, a high school child development class and a university sponsored child care program. These targeted groups evaluated the programs and the accompanying written guide for each of the 30 programs.

Finally, the ETIPS Co-Directors, Coordinator and other professionals and parents were part of a panel for a live call-in program. This program followed the airing of program #30 in August, 1986, after the first broadcast cycle. The second live program was scheduled for December 29 at the end of the second broadcast cycle. The series will continue to be aired on the educational line-up through May, 1987, on the local PBS station, WCTE Channel 22. The programs were also aired in Chattanooga, Knoxville, and Memphis. At this point, the preliminary data suggest that the video quality is excellent, the shows are easy to watch, hold the attention of the viewer and are informative. The data collected on general knowledge indicates families understand more about child development after viewing the programs than prior to viewing. Comments from both primary and secondary evaluators indicate the soundness of the content from the viewpoint of the professional, as well as, the ability to communicate effectively to the family. It is also evident from the data that the series has an impact on the parent or caregivers attitude toward working with the child. Hence, confidence, as well as, competence are strengthened by viewing the series. In addition, there are many people watching the programs from whom we have no means to collect data but whose attitudes toward special-needs children may well be positively influenced by the love and understanding imparted by this series.

Evaluation Product Quality: Evaluation of product quality was a key factor in demonstrating that the content communicated to viewers. This was the most critical factor, since the model could not be implemented without the core (Stepping Stones video series and print materials). A product quality check sheet was devised for primary and secondary targets. To date, all evaluation data have not been collected, however, the data are very positive. A summary sheet is depicted that includes the ratings by the primary targets (parents of special-needs and at-risk infants and toddlers) N=30. The average percentage of the primary targets was 74 who agreed with the three descriptors, (1) it was interesting and kept my attention; (2) it explained the skill well, (3) it showed how parents and family members can help. Twenty-five percent (average rating) of the families strongly agreed with the three descriptions. One percent on the average did not know. None of the viewers disagreed nor strongly disagreed with the three descriptors.

Related to the parent guides, the three descriptors were: 1) it supported and agreed with the program; 2) it was clear and understandable, and 3) it helped one know how to teach the skill. The average percentage of primary targets N=30 was 85% agreeing with the three descriptors while 15% strongly agreed with the descriptors. None responded with "didn't know, disagree or strongly disagree."

ETIPS PROJECT
Product Quality

Family Participant ______________________ Relationship to Child ______________

Date ______________ Program ______________________________

1. How many times did you view the program? ______________________

2. Did you watch the program with another person(s)? ________ Yes ________ No
   If yes, with whom ______________________

3. Did you record the program? ________ Yes ________ No ________ No VCR

4. Did you recommend or suggest the program to anyone else? ________ Yes ________ No
   If so, who ______________________

5. How do you rate the quality of the program on ______________________.
   (skill name)

	Strongly Disagree	Disagree	Don't Know	Agree	Strongly Agree
a. It was interesting and kept my attention	1	2	3	4 (74%)	5 (25%)
b. It explained the skill well	1	2	3	4 (74%)	5 (25%)
c. It showed how parents and family members can help	1	2	3	4 (74%)	5(25

6. How do you rate the quality of the Guide on ______________________.
   (skill name)

	Strongly Disagree	Disagree	Don't Know	Agree	Strongly Agree
a. It supported and agreed with the Program	1	2	3	4(85%)	5 (15%)
b. It was clear and understandable	1	2	3	4(85%)	5 (15%)
c. It helped me know how to teach the skill	1	2	3	4(85%)	5 (15%)

Comments:

Average rating on all 30 programs in "Stepping Stones" series.

Evaluation Parent Confidence - One of the goals of the ETIPS Project was to demonstrate that parents would become more confident in teaching their at-risk or special-needs infant/toddler. A parent opinionnaire was designed to measure the parents' confidence level prior to viewing "Stepping Stones" and reading the parent guides and after viewing. The preliminary data on the primary targets (families with at-risk with special-needs infants/toddlers) indicates that 95% of the parents rate "Agree" to the statements of confidence on the pretest, while 10% had mixed responses of "Agree and Disagree" before viewing "Stepping Stones." After viewing the "Stepping Stones" series, parents (95%) became more confident or "Strongly Agreeing" with the statements. Five percent (5%) did not change in their confidence overall in their ratings of the opinionnaire statements.

ETIPS PROJECT
Parent Opinionnaire

Date:______________________________
Parent's Name______________________
Date of Birth______________________
Child's Name_______________________ Date of Birth___________________
Under each statement, circle the number that best describes your opinion/parent worker may also read statements and record response.

Example: My child needs some kind of special help.
If you agreed with that statement you would circle "2" (agree as shown below:

Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
1	2	3	4	5

Strongly Agree	Agree	Neither Agree Nor Disagree	Disagree	Strongly Disagree
1	2	3	4	5

I AM ABLE TO:

_____1 Seek help for my child.
Example: Ask the right professional about my child's progress.
_____2 Teach my child a skill, i.e., walk, sit up.
_____3 Explain my child's special needs.
_____4 Name or identify the skills my child is having difficulty with.
_____5 Select the most important skills my child needs to develop.
_____6 Talk openly to other people about what my child's needs are.
_____7 Feel close to my child and enjoy teaching him/her skills.
_____8 Be patient with my child while he/she tries to learn a skill.
_____9 Take my child out into the community.
_____10 Know how other parents feel and what they go through when they have a special-needs child.
_____11 Easily get my child to do a skill, i.e., roll over, hold head up.
_____12 Find materials that will help my child learn new skills.
_____13 Be encouraging and positive toward helping my child.
_____14 I am not able to be very helpful to my child in developing new skills.
_____15 Find several ways to teach my child a skill he/she needs, i.e., reaching and grasping, standing up.
_____16 Not sure how to physically assist my child in doing a skill.
_____17 Show my child how to do a skill - i.e., pick up an object.
_____18 Change a material to meet my child's special need.
_____19 Find a good place and time to help my child.
_____20 Reward my child for trying to do a new skill.

_____21 Do not know where to find more information about a skill my child needs, i.e., tracking, bringing hands together.
_____22 Working with my child at an early age does not make much difference.
_____23 Openly talk to relatives about my child's special needs.
_____24 Do not involve ___(child's name)___ brothers and sisters in helping me with my special-needs child.
_____25 See or know how my special needs child will make progress.

Dissemination - To date, the Project dissemination strategy includes distribution and training in the State of Tennessee and to approximately 8-10 other states primarily with rural isolated families. A one-day training workshop, designed to provide instruction about the ETIPS model, the content of the video series, "Stepping Stones, the accompanying print materials, working with rural families and applied uses of the ETIPS model, will be held at each dissemination site. Anticipated impact from dissemination activities are as follows: 1) service providers will find ways to link with public television to provide a new vehicle for reaching isolated families; 2) the "Stepping Stones" series will provide an adjunct and supplement to existing service delivery models, particularly in training parents as teachers of their young handicapped or at-risk children; 3) service providers will use the ETIPS model as a flexible training mechanism within their existing programs; 4) broadcasting the "Stepping Stones" series will stimulate interest and child find for very young handicapped children; 5) interest in generating service delivery where none exists will occur as a result of watching the "Stepping Stones" series and finally, the realization that handicapped infants and toddlers are more like their non-handicapped peers than they are different.

CONCURRENT SESSIONS

THURSDAY, MARCH 19, 1987

1:30 - 2:30 PM

Becky Schroeder, Director
Franklin County Special Education Cooperative
P.O. Box 440
Union, MO 63084

ETT
LEAST RESTRICTIVE ENVIRONMENT

ETT - (Educable/Trainable Transition)

Background History:

Within the state of Missouri, students between the ages of 5-21 who are diagnosed severely or profoundly mentally handicapped have, for the most part, been educated in State owned and operated schools - State Schools for the Severely Handicapped. The State Schools were established in regional areas to provide a learning environment for severely and profoundly handicapped who were not being educated within the public school settings.

Over the years, within the state of Missouri, since the passage of PL 94-142, the criteria for determining eligibility for severely, profoundly, and educable mentally handicapped have become more exclusive. The State has been involved in a court case questioning Least Restrictive Environment. The State Schools usually are built away from local public schools, which in turn, has placed pressure on everyone to evaluate their local delivery system for the handicapped.

Overall Objectives:

While locally monitoring our Cooperative geographic area, the delivery system in the State Schools, the local districts who had students attending the State Schools, and talking with parents of severely handicapped preschool children, the decision evolved to determine if within our local agency we could establish at least one classroom for students who were classified as severely handicapped and/or profound.

By establishing the ETT Program, we hope to allow the students in the program to grow and develop academically, socially, and individually with other peers of varying intelligence levels; from superior to moderately profound, ambulatory to non-ambulatory and verbal to non-verbal.

In addition to programming for the students; building a community and parental awareness and support group for those parents, families, schools having students within the program or for those with preschool children who eventually may enter the program is a primary goal.

Rural Focus:

The ETT Program has been developed in a rural Cooperative area with local financial support and additional start-up support from the Missouri State Department of Elementary and Secondary Special Education. The program provides the Least Restrictive Environment for moderately and severely handicapped students within 15 school districts.

During the first two years of the program, all students were bussed to one central location. As in the original concept, as soon as enough students from a geographic area would be enrolled, plans will begin to develop a satellite site. At this time, plans are being made for a satellite site being developed in the Southwest portion of the Cooperative area for the 87-88 school year. The program will begin with 5-6 students within the regular school campus.

Practical Implications:

With the potential development of satellite sites, the ETT Program in rural areas will begin to bring the Least Restrictive Environment for moderately and profoundly handicapped students closer to their home schools, and thus reducing travel time and transportation costs, and eventually housing and including those students within the Public School setting.

Development:

A Task Force of professionals was established to begin researching the idea of a Low Incidence Local Cooperative Educational Agency Classroom.

The professional expertise representation included local Directors of Special Services, Administrative Assistant, Consultant from the State of Missouri Elementary and Secondary Education, Superintendent, University Professor from UMSL, Ph.D. in Psychology, Psychological Examiners, Physical Therapist, Speech/Language Therapist, teachers from the local State School and EMH teachers from the local district.

The Task Force met once as a complete body to make certain everyone was aware of the purpose of the Task Force and to establish beginning ideas and/or areas.

From the Task Force, the development of three subcommittees evolved. Attendance on a subcommittee was determined by the member's specific area of expertise.

The three areas were:

(a) Exit and Entrance Criteria
(b) Assessment Design
(c) Criterion Curriculum

Each group had their own goal. The Exit and Entrance Committee goal was to establist guidelines for exit criteria from the State Schools based on information from the State Schools, and entrance criteria for students coming from Public School EMH Programs.

After a number of meetings and ideas were discussed, guidelines were established: To begin, a Screening Team specifically for ETT was established. This team consisted of respective teachers, parents of the student, the Director of the Coop, Directors of Special Education from the LEA. The Screening Team discussed the data and the child's past school experiences and achievements.

The following general guidelines will be used to help determine students who may be ready to go into the ETT Program.

Screening data which will be reviewed by State School for Severely Handicapped for a child possibly needing to exit State School for Severely Handicapped:

a. General

1. The student does not require a lot of adult supervision to get classroom assignments done.

2. The student is able to learn from a variety of materials and styles of instruction (can generalize).

3. The student picks up new information quickly (learning rate).
4. The student has a disproportionate number of acquired skills on the ABC.
5. The student has good retention of information across breaks in programming.
6. The student has acceptable "school behavior" throughout the building. He/she can find the way to various places, is responsible to take notes to office and return, handles the cafeteria situation entirely, etc.
7. The student is a leader in the classroom, functioning at a level of much older students.
8. The student is inquisitive asking questions not usually asked by Severely Handicapped Students.
9. The student's level of communication is at a degree much higher than is generally found in State School for Severely Handicapped schools.
10. The student's social maturity level makes them stand out in the classroom.
11. The young adult student who does not have very good cognitive but is capable of competive employment.

b. There are some additional things to take into consideration when screening the severely physically involved student.

1. The student has bright, alert eyes that are reflective of reactions to changes in the environment.
2. The student responds to jokes appropriately.
3. The student responds to communication not directed to him/her.
4. The student is sophisticated in any augmentative communication system at a young age.
5. The student demonstrates an awareness of the environment and interacts with people and/or things with "meaningful interest".

Screening data for Educable Mentally Handicapped students that would alert staff that student would be eligible for Educably Mentally Handicapped.

a. General

1. The student does not require adult supevision to get classroom assignments done.
2. Student can handle a diversified academic curriculum.
3. Student picks up new information quickly.
4. Student knows ABC's and can put them into academic work.
5. Student is able to retain information in a variety of academic areas.

6. Student has appropriate school behavior includes lunch, classroom, recess, bus.
7. Student is able to take on independently classroom instructions.
8. Student is able to ask questions relating to curriculum.
9. Student is able to communicate with those persons whom he comes in contact.
10. The student's social maturity level is at a point the student can interact with others within class appropriately.
11. Child has the potential for further employment and/or completing a modified High School Curriculum.

In addition to screening guidelines, the student's IEP and current diagnostics within one year will be evaluated with the assessment design and criteria in mind. Once a student has been screened for referral* to the ETT Program, the next step is a referral to the ETT Child Study Team: *Referrals can be made by State School, Public School, Agency, and/or parent. All must be submitted by LDSE to Coop after screening. The team consists of the Director of the Coop, ETT instructors, Director of Special Education from referring district, the child's last or present instructor, case manager from Cooperative Assessment Team of referring district, and parents.

The team discusses what expectations each person has for the student and the direction and realistic progress they foresee for the child. Final consideration is given to the assessment and eligibility criteria.

Eligibility Criteria includes:

a. Cognitive/Intelligence

I.Q. - 40-65 range (includes Standard Error Measurement)
Full Scale (flat scatter)
A stability of test scores - over 3 year re-evaluations.

Child must be previously enrolled in one of the two pre-existing programs (SSSH or EMH), or received special preschool training to determine LRE.

Ages 5-16

b. Language

Non-verbal ability or verbal ability necessary to communicate basic needs. (Checklist will be developed for basic needs criteria). Receptive abilities are within range of cognitive abilities. Ability to communicate basic needs.

c. Adaptive Behavior

Behavior observations will be submitted by referring teachers who work with child. (If from SSSH list of observation, criteria are in place - public school will make a similar checklist). During interview process, an Adaptive Behavior Scale is administered.

d. Achievement

Curriculum checklist - developed from curriculum.

Assessment Design:

The essence of EMH programming is understanding EMH and TMH children are capable of mastering academics, usually at a slower rate and with a lower potential ceiling, but they are capable. The ability to understand and manipulate symbols, particularly the symbols of language is required to begin and master formal academics. Characteristically, retarded children, and particularly TMH children, have a great deal of difficulty with symbolic thinking or manipulation. Yet, this is what is required in formal education.

A quality necessary for a student being considered for ETT would be the capacity for symbolization. Children may be able to demonstrate this capacity non-verbally, i.e., they may have receptive skills but be deficient in expressive skills.

Children who possess a greater variation in their development, showing signs of a potential for higher functioning, would be children to consider for the ETT Program. Any child with widely functioning cognitive abilities presents a unique educational challenge, this would include those as candidates for ETT.

General communications skills, including a capacity for symbol language development, higher order reading skills, writing and spelling, are skills which are likely to emerge. These students usually will have language deficits and will require language development.

Children with severe emotional problems may need a program with a different structure and will be considered on an individual basis as all children will be considered.

The following evaluation components will be considered from the child's evaluation data: Data must be current within two years. If all assessment areas have not been addressed, an updated evaluation will be necessary.

Evaluation Components:

a. Cognitive: A formal assessment of the child's global intelligence including a measure of his/her non-verbal abilities.

Preferred instruments:

1. Stanford-Binet Intelligence Scale
2. Leiter International Performance Scale
3. Kaufmann Assessment Battery for Children (KABC)
4. Specialized instruments as needed for those children with specific disabilities in addition to mental retardation.
5. Wechsler Intelligence Scale for Children (WISC-R). This is not the preferred instrument of choice and should be used cautiously.

b. Language: *Starred tests are instruments of choice. Assessment should include 3 or 4 of these instruments to provide a comprehensive picture of the Child's language development.

*1. Peabody Picture Vocabulary Test (PPVT-R) - Receptive language
*2. Expressive One Word Picture Vocabulary Test (EOWPVT)
*3. Language sample: will yield 7 categories of information for all age levels; also provides developmental language levels.

- *4. Detroit Oral Directions
- *5. ACLC
- *6. Test of Language Development-P (TOLD-P): oral vocabulary.
- *7. Bankson: specific subtests as needed.
- *8. Arizona: articulation test.
- 9. Boehm Test of Basic Concepts
- 10. STACL/TACL
- 11. Test of Adolescent Language (TOAL)
- 12. Hawaii: observational tool for children 3 months of age and older.

c. Perceptual: assessment should include sufficient evaluation to determine the child's deficits and preferred learning styles.

1. Developmental Test of Visual Motor Integration (VMI)
2. Motor Free Visual Perception Test (MFVP): to be used in conjunction with VMI.
3. Vision screening.
4. Hearing screening.
5. Wepman Auditory Sequencing.
6. Wepman Auditory Memory
7. Draw-A-Person (DAP): for mental maturity.

d. Behavioral

I. Adaptive Behavior

1. AAMD-Adaptive Behavior Scale (ABS): for parent and teacher.
2. Vineland Adaptive Behavior Scale: for parent and teacher.

*The above two instruments are to be administered by an examiner and are not to be self-administered by the informant. (1 - Teacher--not self administered)

II. Behavior Scales

1. McCarney Behavior Evaluation Scale (BES): teacher and parent (optional).
2. Walker Behavior Checklist.
3. Classroom observation and interview with teacher.
4. Behavioral observations from each examiner.
   - a. Examiner
   - b. LEA
   - c. Teacher of State School which child attends.

e. Motor

1. Bruininks-Oserestsky
2. TARC--motor skills section
3. McCarthy--motor scale.

f. Achievement

1. Classroom teacher--checklist
2. KABC achievement or KTEA
3. PIAT
4. Diagnostic Achievement Battery (DAB)

g. Background and Medical Information

1. Parent Interview
2. Accessing Medical Records
3. Prior interventions
4. General medical and developmental history

Curriculum:

1. State School instructors and Public School instructors worked to develop a beginning curriculum to establish guidelines for those students who would be meeting placement criteria.

   The IEP will be reviewed as to the curriculum and goals which the child individually requires. The curriculum is to be used as a guide for staff, parent, and ETT Child Study Team to better serve and assist in the identification and program for the ETT student.

The following are some adaptive modifications for Secondary Handicaps and some adaptive equipment that might be used if the IEP required:

1. Typewriter

2. Augmented communication - no sign language. Child should already know how to use this system. If he/she has to be taught how to use it, they are not ready for TR room.

3. Wheelchairs

4. Braces

5. Visually Impaired - if he/she can see large print with use of a magnifying glass.

6. Hearing Impaired - if he/she functions within the normal curriculum with hearing aid.

Physical Education

Use I Can Adaptive PE Program

Curriculum Criteria:

IEP goals and objectives from previous placements are reviewed with ETT curriculum in mind. Each student's program is developed individually to maintain the LRE per student. The curriculum guidelines are to be used by the ETT Child Study Team as a guide to assist in the identification and programming for each student.

Language, Behavior, Self Help Skills, Primary Academic, and Prevocational skills are the thrust of the potential curriculum: The ability of each student to reach those curriculum goals will be a determining factor for the entrance into the ETT program.

The academic, language, self help skills, and behavior areas addressed in the curriculum guide in the appendix are the skills which will need to be mastered for eventual successful return to a LRE or to give necessary documentation to the inclusion in a more restrictive environment.

FRANKLIN COUNTY SPECIAL EDUCATION COOPERATIVE
OVERVIEW OF 1985-86

(First Year of Educable Trainable Transition Program)
(ETT)

The Educable Trainable Transition Room fluctuated from five (5) to nine (9) students this year. Ages ranged from five (5) to twelve (12) years old.

I.E.P.'s (Individual Education Programs) were developed by Child Study Teams. Progress Summary Charts/notes were written at the end of the day. These provided a daily evaluation of the students program and progress on each particular objective.

The class was staffed by one (1) teacher and two (2) aides. With the low student to staff ratio early in the year, much one to one teaching took place which proved profitable in meeting the wide range of student functioning levels: from limited speech, physical limitations, up to reading on a second grade level, and telling time to the minute.

The students were assigned to a group and then put into a rotating staff schedule. This schedule allowed for all students to be worked with equally by all the staff and helped provide variations in teaching methods, keeping the students interested and motivated.

Teaching took place within all learning modalities: visually, auditorially and tactically. During the teaching sessions as well as during the daily development of independent functioning, and the reinforcing of a variety of skills, manipulatives for the student were a must. Many of our students worked on paper and pencil tasks with staff supervision. However, only two (2) of our students worked for any major lengths of time independently on paper and pencil tasks.

Other items used as teaching aids and motivators besides workbooks, books, games and manipulates were overhead projectors, the blackboard, cassette recorders, and the record player. A video camera was also used to allow for the filming of particular skills to determine the students progress at different times. This information was then shared with other professionals who worked with the students. A video camera would provide further assistance for use as well as being a motivator for the students.

Weekly, monthly, and yearly physical therapy programming was developed one day every two weeks. The staff carried out the program daily with the students. The teachers constantly are being trained on an ongoing basis by the Physical Therapist to carry out individual programs for the students.

Speech/Language Therapy was provided for all those requiring it on a daily basis through speech therapy and/or classroom. Some received therapy in a one to one situation, some in small groups, and some received both.

Five (5) of the students were included in the Art, Music, and P.E. classes for Educable Mentally Handicapped students according to age and/or appropriate adaptive behavior and their I.E.P.

One (1) student spent the morning in ETT focusing on reading skills. This enabled him to receive extra help with his reading. The EMH teacher then focused more on Math with him during the afternoon.

A checklist of objectives, each rated satisfactorily or not, as well as a narrative made up the report cards sent home every nine (9) weeks.

During the 86-87 schedule, we will have the addition of a second classroom. The staff will consist of two (2) teachers and an aide shared by the two (2) classes. We are expecting approximately twelve (12) students to begin the year, with additional students expected to come throughout the year as they did during the first year.

Basically, the formation of the program will remain the same, the second classroom, however, will allow the students to be placed more by ability and age. More small group instruction along with the one-to-one instruction will be taking place, whether it is a group doing basic reading or counting objects.

There will also be more emphasis on unit work and large group activities at the close of each day, when the two classes will be combined for socialization and group skills.

The students have progressed as a whole very well. The parents as a group generally are very happy and pleased with the program and are looking forward to its long existence within the Franklin County Special Education Cooperative.

APPENDIX

Socialization

Asks for help when having difficulty (P, I, Jr.)
Works along at chore for 20-30 minutes (P)
Takes turns with 8-9 other children (P)
Plays with 2-3 children for 20 minutes in coop act, project (P)
Engages in socially acceptable behavior in public (P)
States feelings about self (Mad, Happy, Love, etc.)
Plays with 4-5 children in coop act without constant supervision (P)

Language

Uses "ing" verb form (P, I)
Uses regular plural forms (P, I)
Uses some irregular past tense forms (P, I)
Uses regular past tense forms (P, I)
Tells the part of day for specific daily activities (P)
Tells street address (P, I)
Names town lived in (P, I)
Tells telephone number (P, I)
Carries out a series of 3 directions (P)
Uses compound sentences (P)
Tells whether or not two words rhyme (P)
Uses complex sentences (P)
Points to some, many, several (P)
Points to most, least, few (P)
Describes location or movement (through, away, from, toward) (P)
Puts together and tells 3-5 part sequence story (P, I, Jr.)
Tells the opposite of --- (P)
Uses yesterday and tomorrow meaningfully (P)

Self Help

Snaps/hooks clothing (P)
Avoids common dangers (P)
Avoids poisons and all harmful substances (P)
Unbuttons own clothing (P)
Buttons own clothing (P)
Puts zipper foot in catch (P)

APPENDIX

Washes hands and face (P)
Wipes and blows nose when needed without reminders (P)
Buckles and unbuckles belt on dress/pants and shoes (P)
Threads belt into pants (P)
Combs or brushes hair (P)
Laces shoes (P)
Ties Shoes (P)

Cognitive

Copies a circle (P)
Copies a square (P)
Tells if object is heavy or light (P)
Matches sequence or pattern of blocks or beads (P)
Names objects as same and different (P)
Picks up specified number of objects on request (P)
Recalls 4 objects seen in a picture (P)
Names time of day associated with activities (P, I, Jr.)
Names penny, nickel and dime (P, I)
Tells color of named objects (P)
Retells main facts from story heard (P, I)
Places object behind, beside, next to (P)
Matches equal sets of sample (P)
Counts by Rote 1 to 20 (P)
Names first, middle and last position (P)
Discriminates and orders by size (biggest, next biggest) (P)
Discriminates and orders by length (Largest, next largest) (P)
Names 10 numerals (P)
Names left and right on self (P)
Says letters of alphabet in order (P)
Prints own first name (P)
Names capital letters of alphabet (P)
Puts numerals 1 to 10 in proper sequence (P)
Names position of objects, first, second, third (P)
Names lower case letters of alphabet (P)
Matches capital to lower case letters of alphabet
Points to named numerals 1 to 25 (P)
Names days of week in order (P)

APPENDIX

Tells month and day of Birthday (P)
Sight reads 10 printed words (P)

Motor

Cuts out and pastes simple shapes (P)
Prints name on primary paper using lines (P)

Fluency

Identifies verb/be/ in present tense singular (is) (I, Jr.)
Identifies verb/be/ in past tense singular (was) (I, Jr.)
Identifies verb/be/ in present tense plural (are) (I, Jr.)
Identifies verb/be/ in past tense plural (were) (I, Jr.)
Identifies past tense (d, ed/ morpheme (cared, pulled, etc.) (I, Jr.)
Uses past tense /d, ed/ morphemes (cared, pulled, etc.) (P, I, Jr.)
Uses past tense irregular verb (ran, bought, etc.) (Jr.)
Identifies correct verb tense in structured speech (I, Jr.)
Uses correct verb tense in structured speech (P, I, Jr.)
Uses correct verb tense in conversational speech (P, I, Jr.)

Syntax Contractions

Identifies contractions (Jr.)
Uses contractions (P, I, Jr.)

Syntax Pronouns

Uses pronouns in structured speech (P, I, Jr.)

Syntax Plurals

Identifies plural /s/ morphemes (hooks, /s/, frogs, /z/) (I, Jr.)
Uses plural /s/ morphemes (hooks /s/, frogs /z/) (P)
Identifies plural irregular noun (deer, geese) (Jr.)
Uses plural irregular noun (deer, geese) (I)

Syntax Misc. Parts of Speech

Uses adjectives in structured speech (P)
Uses adjectives in conversational speech (I, Jr.)
Uses prepositions (for, in, at, under, over, around) (P, I, Jr.)
Uses nouns in structured speech (P, I, Jr.)
Identifies synonyms (P, I, Jr.)
Identifies antonyms (P, I, Jr.)

APPENDIX

Behavior

School and Classroom

Follows directions (P, I)

Assumes classroom responsibilities (P, I)

Saves points, tokens for a special treat or reward (P, I)

Works quietly without disturbing others (P, I)

Raises hand and waits to be called before speaking (P, I)

Raises hand to ask for help or answer question (P, I)

Stays in seat in classroom (P, I)

Increases one task attention span to 10 minutes (P)

Increases one task attention span to more than 10 minutes (I)

Increases independent working time up to 30 minutes (Instruct level) (P)

Increases independent working time up to 45 minutes (Instruct level) (I)

Responds to request within 30 seconds (P)

Corrects assignment or behavior without resentment/withdrawal (P, I)

Completes assigned tasks (P, I)

Completes assignments independently (P, I, Jr.)

Speaks loudly enough to be heard by class (P)

Takes turns, sticks to topic and doesn't ridicule (in group) (P, I, Jr.)

Refrains from interrupting others (P, I, Jr.)

Takes turns and follows rules during game and activities (P, I)

Social

Shows respect for the rights and properties of others (P, I, Jr.)

Copes with teasing/harassment associated with exceptionality (P, I, Jr.)

Interacts with children in acceptable way (P, I, Jr.)

Refrains from calling others names (P, I, Jr.)

Discusses reactions to situations and later wish to change (P, I, Jr.)

Uses acceptable ways to handle negative emotions (P, I, Jr.)

Interacts with others appropriately (P, I, Jr.)

Refrains from making inappropriate noises (P)

Personal

Accepts defeat/disappointment appropriately (P, I, Jr.)

Uses acceptable table manners (P, I, Jr.)

Practices self control regularly (P, I, Jr.)

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APPENDIX

Selects and engages in ten minute free time act in school (P, I, Jr.)
Uses simple courtesies such as excuse me, thank you (P, I, Jr.)
Keeps belongings in desk or locker (P, I, Jr.)

Handwriting

Prints first and last name (P, I)
Forms letters of the alphabet properly (P, I)
Copies any word written in manuscript (P)
Copies complete simple sentence properly (I, Jr.)
Prints upper case letters of the alphabet from memory (P, I)
Writes name in cursive (Jr.)
Writes wihin the lines and margins (P, I, Jr.)

Oral Language (Speaking & Listening)

Follows an oral three step direction in sequence (P, I)
Answers questions beginning with who, what, where, why, when (P)
Verbally expresses complete thoughts in clear speech (P, I, Jr.)
Uses complete sentences during spontaneous speech (P, I)

Written (Personal data, Sentences, Paragraphs)

Writes address (I, Jr.)
Writes the date (Jr.)
Composes and writes sentences (Jr.)

Grammar (Parts and Figures of Speech, Sentence Construction

Identifies synonyms (P, I, Jr.)
Identifies Antonyms (P, I, Jr.)
Capitalizes necessary words in a sentence (Jr.)

Info Retrieval & Processing

Alphabetizes to the first letter (I, Jr.)
Classifies items under their proper categorical heading (P, I, Jr.)

Pre Reading

Demonstrates understanding of same-difference concepts (P)
State which words heard begin alike (P, I)
State which words heard end alike (I)

APPENDIX

Match similar objects/symbols (P)
Match similar pictures (P)
Match similar words (P)
Select object/symbol different from group of object/symbols (P, I)
Select picture different from group of pictures (P, I)
Sort object or picture by appearance, color, size, or function (P, I)
Classify object or picture by appearance, color, size or function (I)
Put three pictures in sequential order (I)
Put five pictures in sequential order (Jr.)
Demonstrate understanding of spatial relationships (P, I)
Recall details of a story presented orally (P, I, Jr.)
Summarize a story presented orally (P, I, Jr.)

Alphabet

Recite the alphabet in sequence (P)
Say all letters in alphabet and their related sounds (P, I)
Identify upper case letters of alphabet out of sequence (P, I)
Identify lower case letters of alphabet out of sequence (P, I)
Match upper and lower case letters of the alphabet (P)

Work attack, Consonants, Vowels, Rhyme, Syllables

Match rhyming pictures (P)
Give words that rhyme with stimulus words (I)
Use pictorial clues when attacking unknown words in context (P)
Blend individual sounds into words (I)
Match initial consonant letter to correct picture (I)
Match ending consonant letter to correct picture (I)
Identify beginning consonants in a word (P, I)
Identify ending consonants in a word (I)
Pronounce all beginning word blends (I)
Identify consonant blends in a word (I)
Pronounce the consonant digraph which begins a word (I)
Identify the consonant digraph which begins a word (I)
Produce short vowel sounds (P)
Produce long vowel sounds (P)
Identify short vowels in a word (I)
Identify long vowels in a word (I)
Use correct vowel sounds to unknown word in context (I, Jr.)

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Apply correct vowel sounds to unknown word in isolation (I, Jr.)

Differentiate the long and short vowel sounds (I)

Identify the component parts of the compound words (I)

Produce and read common contractions (I)

Comprehension

Match pictures with corresponding words (P, I)

Read and follow written directions at instructional level (P, I, Jr)

Recall orally details of stories read (P, I Jr)

Answer comprehension question orally after listening to story (P, I, Jr.)

Answer comprehension question in writing after reading story (I, Jr.)

Retell events of a reading selection in correct order (P, I, Jr.)

Sight Vocabulary

Read the color words (P)

Read the number words one to ten (P)

Read the number words one to twenty-five (I)

Read and interpret ten common signs, (Stop, exit, McDonald's) (P)

Read and interpret twenty-five common signs (stop, exit, etc.) (I)

Read the days of the week and their abbreviations (I)

Read the months of the year and their abbreviations (I)

Read basic sight vocabulary at instructional level (P, I, Jr.)

Spelling

Spells five new words each week (I, Jr.)

Computation Numeration

Counts by rote from one to twenty (P)

Counts by rote from one to fifty (I)

Counts by rote from one to one hundred (Jr)

Counts by 5's to 60 (I, Jr.)

Counts by 10's to one hundred (I, Jr.)

Matches sets of objects from one to ten (P)

Matches sets of objects from one to twenty (I)

Counts objects to 10 (P)

Identifies numerals 1 to 20 when shown out of sequence (P)

Identifies numerals 1 to 100 when shown out of sequence (I, Jr.)

APPENDIX

Matches numerals 1 to 20 with sets of objects (P)

Writes numerals in order from 1 to 20 (P)

Writes numerals in order from 1 to 100 (I, Jr)

Writes numerals 1 to 20 out of sequence from dictation (P)

Writes numerals 1 to 100 out of sequence from dictation (I, Jr.)

Reads number words from 1 to 20 (P, I)

Identifies preceding and succeeding numbers (I, Jr.)

Selects number which is more/less than another number (I, Jr.)

Computation Addition

Computes addition facts through 20 with counting device (P)

Adds 2-digit problems with regrouping (Jr.)

Adds 2-digit problems without regrouping (I)

Computation Subtraction

Computes facts through 20 with aid-fingers/count device (P)

Subtracts 2-digit problems with regroup (Jr.)

Subtracts 2-digit problems without regroup (I)

Computation Multiplication

Computes multiplication facts to 9's with aid/count device/table (Jr.)

Computation Divison

Computes division facts to 9's with aid/count device/table (Jr.)

Computation Comprehension

Solves 2-step story problems presented orally using add (P, I, Jr.)

Solves 2-step story problems presented orally using subtraction (P, I, Jr.)

Time Clock

Demonstrates understanding of yesterday, tomorrow, tomorrow night, etc. (P, I)

Tells whether it is morning, afternoon, or night (P)

Discriminates time as a.m. or p.m. (I, Jr.)

Names times of day associated with various activities (I, Jr.)

Identifies the hour hand on a clock face (P)

Identifies the minute hand on a clock face (P)

Sets hands of clock to nearest hour (P)

APPENDIX

Sets hands of clock to nearest 1/2 hour (P)

Sets hands of clock to five minute intervals (I)

Sets hands of clock to nearest minute (Jr.)

Counts in clockwise motion marks on face of clock (I, Jr.)

Matches numerical time to corresponding clock face in five minute intervals (P, I, Jr.)

States time to nearest hour from face of clock (P)

States time to nearest half hour from face of clock (P)

States time to nearest five minute interval from clock face (I)

States time to nearest minute from face of clock (Jr.)

Time Calendar

Names the months of the year in order (I, Jr.)

Locates on a calendar today (I, Jr.)

Measurement Linear

Draws lines/figures to nearest inch using tools (I, Jr.)

Consumer Money

Names penny, nickel, dime, and quarter (P)

Matches money equivalents up to $.10 (P, I)

Matches money equivalents up to $.25 (I)

Matches money equivalents up to $1.00 (Jr.)

States coin values (P, I)

Writes dictated amounts of money up to $1.00 (I)

Writes dictated amounts of money up to $10.00 (Jr.)

Reads amounts of money up to $1.00 (I)

Reads amounts of money up to $10.00 (Jr.)

Counts change up to $.50 (I)

Counts change (and bills) up to $1.00 (Jr.)

Computes change up to $.50 (I)

Computes change up to $1.00 (Jr.)

Presentors: James McLeskey

Jack Cummings

Title: The Practice of School Psychology in Rural Settings: A Series of Four Training Modules

Topical Area: Health & Related Services

Abstract: School Psychologists who practice in rural settings face unique problems that require specific knowledge and skills to ensure effective practice. A set of four training modules were developed for use by trainers of school psychologists and other related services personnel to ensure that necessary knowledge and skills are built into training programs. These four modules will be reviewed using a workshop format. Copies of the modules will be made available for those attending. The modules address:

a. Characteristics of rural settings: Implications for school psychologists

b. Training school psychologists for practice in rural settings

c. Working with parents in rural settings

d. Delivery of quality assessment in rural settings.

Each module contains a review of the literature on the topic of concern, activities for use in conveying relevant information to trainees, and a bibliography. These modules were developed as part of a Department of Education, Office of Special Education Personnel Preparation training grant.

Ellen R. Elwell
CLASS, Inc.
16 Haverhill St.
Andover, MA 01810

Curriculum Planning and Program Evaluation for Disabled/Handicapped Young Adults.

CLASS, Incorporated is a service provider for disabled/handicapped young adults. Services are contracted for clients to perform and are monitored by DMH. The Citizens League for Adult Special Services (CLASS) Inc. has been in operation since 1976. The non-profit service provider initially served eight clients, but has expanded to over 100 clients. CLASS operates five separate, yet integrated, daily programs: A Basic Skills Program, Day Habilitation Program, Day Activity Program, Work Activity Program, and Transitional Employment.

This presentation will concentrate on the Day Activity Program. The Day Activity Program is designed to address a wide range of skill areas of the developmentally disabled adults who are the recipients of its services. Agency and program philosophy are based upon the belief that our clients are potential employees and wage earners. We expect that, with comprehensive training and support services, our clients can assume responsible and valued positions in the workforce in their respective communities. Given that fundamental belief, the Day Activity Program has developed a curriculum geared toward assisting each client to develop his/her potential to the fullest.

The training provided in the Day Activity Program encompass:

* Vocational training, both in-house and at community based worksites
* Functional communication enhancement geared toward on-the-job problem solving and self-advocacy
* Interpersonal skills development
* Community access and utilization
* Academic training including functional reading, writing, and money skills as they relate to skills needed at work.

Training for the clients is provided with a 1:5 staff/client ratio utilizing a team teaching approach. The process incorporates the professional assistance of consultants who specialize in language, vocational training, behavior management, and rehabilitative services.

Trainees in this program perform many varied jobs as part of their training curriculum. These jobs are part of the subcontracting service that CLASS offers to manufacturers in private industry. This service allows industry to cut costs by having a specific type of work sent out to be done, while at the same time, allowing us to offer quality "hands on" training situations. Trainees are paid salaries for all of the work that they perform. Types of jobs that we have undertaken range from bulk-mailing, packaging jobs, and small-part assembly, to complicated electronic component inspection and assembly.

The program supervisor will elabbrate in detail on the seven program exit criteria utilized for evaluation of the clients. Bar-graph examples will be provided as utilized for clients as part of the Individual Service Plan (ISP). Time will be allowed for the participants to have questions answered pertaining to the overall evaluation of the program.

TITLE: An Approach to Computer Training for Teachers Residing in Rural Areas

FORMAT: Lecture and Demonstration

TIME: 50 - 60 minutes

A-V EQUIPMENT: Overhead Projector

CONTENT EMPHASIS: Processes and Procedures of Organization Change Through Technology

DESCRIPTION: Nine regional centers were funded by the Indiana State Department of Education to elaborate the effectiveness of computer instruction elementary - through secondary grades. Ball State's decentralized approach using teachers as trainers linked to university "computer experts," offers an innovative approach.

PRESENTER:
Dr. Dale L. Lawver
Chair, Special Education
Teachers College
Ball State University
Muncie, IN 47306
(317) 285-5700

An Approach to Computer Training for Teachers Residing in Rural Areas

Abstract

The Indiana Consortium for Computer and High Technology Education has provided funding to nine regional sites in the State. The responsibility of each target site is to provide 18 hours of introductory curriculum training in computer literacy to 2000 teachers.

Approaches to the training have taken a variety of forms. In the majority of cases, from one to four sites are established and from two to six trainers are selected to teach the curriculum. The one to two site approach with a handful of trainers has been the typical organizational design for computer training.

In this session the presenter will outline a radical departure to the typical training approach. Prior to submitting a proposal we met with area superintendents or their designees to discuss the most effective, efficient, and meaningful ways to deliver training. A negotiated action plan, bending to meet special teacher/administrator demands, but also holding tight to our own was formalized. For example, a major demand from superintendents was that substitute teachers not be hired to replace trainees and that all training occur during non-school hours. While this position was not popular with the Consortium, nonetheless, we were willing to argue the case on the grounds that this position was strongly-held by superintendents who would decide whether their teachers would be informed of the training opportunity (teachers who participated were paid $96). At the same time, we believed, and continue to believe, that teachers from the public schools who have had background and

experience with microcomputers ought to assume responsibility for teaching. While this position was valued highly by superintendents as well, since it provided some work opportunity to teachers who might otherwise be left without any summer employment (we paid trainers $180 per 18-hour session), we insisted that we would need to screen, monitor, and control who the trainers would be.

Once funded, we reviewed applications and provided an on-campus assessment and training session for 47 public school teachers. At the same time, we met with superintendents or their designees -- called satellite computer training center directors -- and agreed on procedures for setting up satellite centers, coordinating schedules, assigning trainers, and other logistical matters. Within two weeks of receiving the grant award, we were up and running with the first of 64 summer computer training sessions, enrolling nearly 1,000 teachers in a nine-county area surrounding the University and employing nearly two-thirds of the original trainer applicants.

In this session, the presenter will provide an in-depth description and analysis of our computer training program in Indiana - Region VI. The presentation will include data on needs assessments, evaluations of training sessions, and pre- and post-test content results. Similarly, the presenter will distribute and discuss the 18-hour curriculum, step-by-step procedures for setting up such a program, and forms used for attendance, budgets validating instruction, and so forth.

Finally, an examination of some of the disadvantages and problems associated with decentralizing and innovation and involving large numbers of teachers in leadership roles will be discussed.

Presenter: Dr. Dale Lawver, Chair
Department of Special Education
Ball State University
Muncie, IN 47306

Presented by:
Joseph DeMarsh, Ph.D.
4410 N. Saddlebag Trail
Scottsdale, Arizona 85251

COMPUTER APPLICATIONS FOR RURAL TRANSITION PROGRAMS

ABSTRACT

The goal of this project was to provide an automated information, referral and follow-up service for 16-22 year-old disabled students, to assist in their difficult transition from secondary schools to the working world. First, an Information Clearinghouse of community educational, training and employment resources relevant to transitioning youth was constructed. Second, a client spreadsheet was developed, allowing information concerning short and long-term vocational goals to serve as selection criteria for computer searches of the Clearinghouse; thus, identifying the community resources specific to each youth. Third, job placement and follow-up services are provided to assist the young worker develop necessary and appropriate work behaviors amd survival skills.

One hundred and fifty disabled youth were enrolled from twelve area secondary schools to test the effectiveness of this computer assisted transition service. Computer searches for appropriate post-graduation placements were completed for all subjects, resulting in 139 youth (93%) being linked with community resources, and 87 youth (63%) continuing on to job placements. The effectiveness of this outcome data, and the advantages of utilizing the computerized Information Clearinghouse in the rural transition process is discussed.

BACKGROUND INFORMATION

THE NEED FOR TRANSITION SERVICES

The need to provide school-to-work transition services for disabled students, aged 16-21 years, is well documented in the unemployment literature. The interested reader is referred to Bowe, 1980; Levitan & Taggart, 1976; McKinney & Okeafor, 1984; Ognibene, 1984; Peterson, 1984; and Will, 1984 for national unemployment statistics for this target group, and Edgar et al., 1985; Bellamy, 1985; Ross, et al., 1985; and Wehman et al., 1985 for national underemployment data.

The need for service was substantiated in the 1986 Annual Planning Document for the State of Arizona, which reveals that the highest unemployment rate for a target population in Maricopa County is accorded to the noninstitutionalized handicapped population. More that 50% of this population is unemployed; that is 51,545 of the 87,180 handicapped residents are "jobless", dependent on family, community or government subsidies for economic sustenance. The subgroup of this population, by age group, with the most severe unemployment problem is handicapped youth aged 16-21. Handicapped youth number 9,272 in Maricopa county; 6,212 of these individuals stand outside the labor force.

NEEDS OF TRANSITION SPECIALISTS

In the 1983 Amendments to the Education of the Handicapped Act (EHA P.L. 98-199) Congress sought to address directly these major educational and employment transition difficulties by allocating $6.6 million annually in grants and contracts for services assisting these youth. Since that time, transition specialists have found themselves fulfilling a variety of roles including, outreach coordinator between schools and community resources, special needs counseling, student advocacy, parent education, and job placement, just to name a few (Chadsey-Rush, 1986; Cobb & Phelps, 1983). One acitivity which has been consistently identified as primary to most successful transition programs; however,is establishing linkages between post secondary training resources and the graduating disabled student (DeMarsh, 1986; Phelps, et al., 1986).

With only 29% of disabled youth receiving vocational training during their secondary school education, many youth find themselves in need of additional post secondary vocational and other training to be truly viable in the competitive job market. As the unemployment figures for this population indicate; however, the majority of disabled graduates never attain the skills necessary to gain employment.

The question whether educational/training resources exists is usually not the problem; as over 400 such services have been identified in the greater Phoenix area alone. Transition counselors, and special educators consistently identify the problem more as the lack of an organized and reliable information source about relevant community educational/training and employment resources. Disabled youth as well as their families and teachers are unfamiliar with the various resources available, limiting the post secondary options for training and employement considered upon graduation. Additionally, community resources' status often change from year to year (eg., services offered, eligibility requirements, location, fees, etc.) which further exacerbates this information gap.

PREVIOUS COMPUTER APPLICATIONS IN SPECIAL EDUCATION AND REHABILITATION

Several fine reviews are currently available which describe "state of the art" in computer applications for the Special Education and Rehabilitation fields. Because such a review is beyond the scope of the present paper, the interested reader is referred to Nave, et al., 1983: Backer & Trotter, 1986; Foulds, 1982; Lavine, 1980; Blaszczyk, 1981, and Bennett, 1982. These reviews indicate that the majority of computer applications in the rehabilitation and special education fields have been primarily dedicated to:

1. Providing adaptive or functional aids for specific handicapping conditions such as speech systhesis (Barker, 1982; Batie, 1981; Deane, 1982; Semancik & Curtis, 1982; Sargent & Nyerges, 1979; Watson, 1979), the electronic mailbox (Cerf, 1978), touch sensitive monitors (Allard & Thorkildsen, 1981; Jung, 1980; Thorkildsen, et al., 1979), telecommunications (Aeschleman & Tawney, 1978; Johansen et al., 1981; Nocerino et al., 1978) and other functional aids (Aylor et al., 1981; Administrative, Training and Publication Staff, 1982; Rahimi, 1981; Vanderheiden, 1981; 1982) and other prosthetic applications (Goldberg, 1979).

2. Providing computer assisted instruction for a variety of handicapping conditions and educational and performance levels such as the blind (Ballenger, 1979; Evans & Simpkins, 1972; Hoffmeyer, 1980), deaf (Arcanin & Zawolkow, 1980; Culbertson, 1974; Dolman, 1980, Watson, 1979; and mentally retarded (Allard & Thorkildsen, 1981; Bitzer, 1979; Brebner & Hallworth,1977; Lally, 1981; Thomas, 1981; Thorkildsen, 1982; Thorkildsen & Allard, 1980) among many others.

3. Providing management information strategies for institutions (Bower, 1975; Fleming & Vance, 1974; McGuire, 1981) sheltered workshops (Boles, 1980; Cimler & Henderson, 1979), vocational rehabilitation centers (Administration, Training and Publication Staff, 1982; Crawford, 1980; Stern & Rubin, 1979), data storage and manipulation as in job banks (McCroskey, 1986; Houghton, 1986; Soforenko, 1974) and information banks of materials on microcomputers for disabled individuals (Apple, 1986).

4. Providing computerized client assessment instruments (Cartwright & Cartwright, 1973; Hall, 1974; Hall et al., 1974; Hasselbring & Crossland, 1981; Lerner & Schuyler, 1974; Macleod & Overheu, 1977; McGuire, 1981; Wilson & Fox, 1982). It is apparent that computers are utilized across a wide

continuum of applications within the special education and rehabilitation fields. However, there has been little work done to date in utilizing computers to assist transition specialists with their difficult task of establishing linkages between the graduating disabled students and appropriate community resources. Given the developments of computer technology in the areas described above, it seems reasonable to expect that computers can also make significant contributions to the transition field.

COMPUTERIZED TRANSITION: A NEW FRONTIER

In this project, computer applications for transition specialists took the form of an Information Clearinghouse of community resources relevant to transitioning youth and a client spreadsheet that could be used in conjunction with the Clearinghouse to identify resources relevant to the long- and short-term vocational goals of each youth.

INFORMATION CLEARINGHOUSE:

To meet the needs of transition specialists for a current and centralized information source specific to the field, a computerized Information Clearinghouse of community educational, training and employment resources was designed. The Clearinghouse, constructed upon an IBM compatible data-base manager software program is in a catalog format similar to one developed by the Prentke Romich Company (which lists materials available on micro-computers for disabled individuals), and the Trace Research and Development Center at the University of Wisconsin (which is a software registry and listing of programs adapted for Rehabilitation applications).

The initial step in developing the Clearinghouse was the collection and analysis of all community resources relevant to transitioning youth. Resources included private for profit, private non-profit, government agencies, educational and other service providers. The focus was on analyzing and coding each resource according to the following variables:

* Target group served
* Target area served
* Age group served
* Fee schedule for services
* Intake procedures and contact person
* Programs or specific services offered
* Eligibility requirements
* Funding sources
* Contact person
* Phone number
* Address

Once coded, the information was entered into the data-base manager with one record per resource (see figure 1). The file containing all community resource records is called the Clearinghouse. Once the Clearinghouse was completed, the input of specific client data (age, disability, etc.) and client transitional needs (i.e., work experience program, vocational evaluation, transportation, financial aid, etc.) provided immediate access to resource information tailored to each client's needs. Based on client input data, the program searches the community resource file and outputs a listing of agencies and contact persons that may be potential referral sources. Project staff can further screen these sources for eligibility and intake criteria. (see Figure 1)

The benefits of the Clearinghouse include:

1. Instant access to all community education, training and employment resources relevant to transitioning secondary disabled youth.

2. An information source that can be easily updated and modified as the status of corresponding community resources change.

3. Search, order, and sort commands which allow each client's short- and long-term vocational goals to serve as selection criteria.

CLIENT SPREADSHEETS

Client Spreadhsheets were developed to assist with both data recording and storage and to interface with the Information Clearinghouse. Except for changes in field content and length, these spreadsheets are similar to many currently available models such as Brown (1982), Birchwell (1976), Lehrer (1978), Powers (1976) and others (see Figure 2).

The Client Spreadsheet fills a variety of roles including: 1) An information management and client record filing system that is easily updated and stored; 2) A source file from which a variety of forms or "screens" can be constructed (eg. Individual Transition Plans (Powers, 1976; Wilson, 1982), Year-end and other evaluation reports, Exit Plans, etc.); 3) Information concerning vocational goals which can then be utilized as selection criteria for Clearinghouse searches.

RESULTS OF A PILOT TRANSITION PROGRAM

The following section provides results from Project Bridge, a transition program piloting the aforementioned computer applications for assisting disabled youth make the transition from secondary school to the working world. Project Bridge is a non-experimental demonstration program serving youth referred by five participating school districts in the Greater Phoenix Metropolitan area. The one hundred and fifty youth originally enrolled in the program contain a representative sampling of disabilities from mild to severe (see Figure 3).

PROJECT BRIDGE

COMMUNITY RESOURCE SPREADSHEET

EXAMPLE

1. code : 0717
2. program name : Latch School
3. address : 8145 N. 27TH Ave.
4. city, state, zip : Phoenix, Az., 85021
5. phone : 602/995-7366
6. contact name : Sandy Landy
7. target group : 101,103,104,105
8. area : 202
9. fees : 301
10 .programs : 403,417,446,451
11. age : 504
12. intake : 601,602
13. eligibility : 701
14. funding : 804,809,835

Examples of Resource Codes

AGE (field #11)

none	500
less than 18 years	501
18 - 22	502
23 - 25	503
older than 25	504
elderly	505

INTAKE (field #11)

appointment	601
phone	602
walk-in	603
write	604
school district	605
des	606
courts	607
medical	608
application/screening	609
self	610
agency referral	611
waiting period	612
registration	613

ELIGIBILITY (field #13)

no information	700
disabled	701
income requirements	702
residency	703
age	704
screeming done	705
des eligigility	706
records required	707
state/fereral guidelines	708
course requirements	709

FEES (field #9)

no fee	300
sliding fee scale	301
donations	302
membership	303
treatment fee	304
agency contracts	305
nominal	306
fixed	307
negotiate	308
paid by school district	309

Figure 1

PROJECT BRIDGE
CLIENT SPREADSHEET

CLIENT NAME:
PB CODE: 1011
OF CONTACTS: 28
REFERRAL DATE: 03-13-85
ADDRESS: PO BOX 308
CITY: LAVEEN
STATE: AZ
ZIP: 85339
PHONE: (602) 237-4019
PRECINCT #:
S.S.#: 601-10-3217
DOB: 09-07-68
GENDER: M
RACE: W
CONTACT PERSON: LINDA GOINS
REFERRAL SOURCE: PG
DISABILITY #1: LD
DISABILITY #2:
DISABILITY #3:
HIGH SCHOOL: BOSTROM
PHONE: (000) 000-0000
YEARS ED.COMP: 11
I.Q.: 96
READING COMP: 1.6
SPELLING COMP: 0.0
MATH COMP: 4.2
GRAD.CLASS(YR): 1986
CLASS STATUS: SL
PREVIOUS EMP.: N
BARRIERS/LIMIT: HL
BARRIERS/LIMIT: SK
BARRIERS/LIMIT: OP
BARRIERS/LIMIT:
BARRIERS/LIMIT:
C/A CONTACT #1: LDS
C/A CONTACT #2:
C/A CONTACT #3:
C/A CONTACT #4:
L-TERM GOAL #1: COMPETITIVE EMPLOYMENT

L-TERM GOAL #2:

L-TERM GOAL #3:

S-TERM GOAL #1: 415
S-TERM GOAL #2: 449
S-TERM GOAL #3: 448
S-TERM GOAL #4: 444

Figure 2

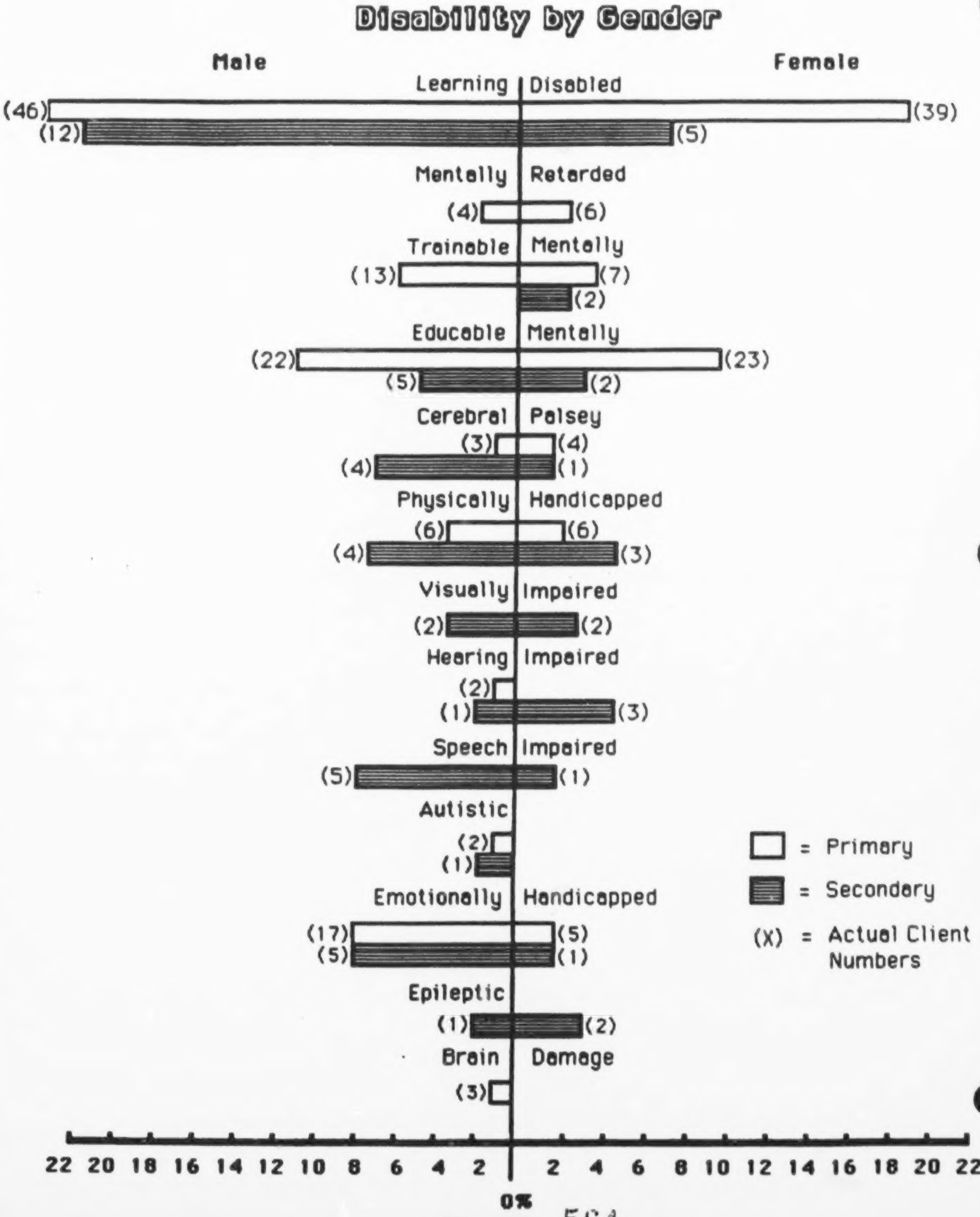

Disability by Gender
Male
Female
Learning Disabled
(46)
(39)
(12)
(5)
Mentally Retarded
(4)
(6)
Trainable Mentally
(13)
(7)
(2)
Educable Mentally
(22)
(23)
(5)
(2)
Cerebral Palsey
(3)
(4)
(4)
(1)
Physically Handicapped
(6)
(6)
(4)
(3)
Visually Impaired
(2)
(2)
Hearing Impaired
(2)
(1)
(3)
Speech Impaired
(5)
(1)
Autistic
(2)
(1)
Emotionally Handicapped
(17)
(5)
(5)
(1)
Epileptic
(1)
(2)
Brain Damage
(3)
☐ = Primary
▤ = Secondary
(X) = Actual Client Numbers
22 20 18 16 14 12 10 8 6 4 2 2 4 6 8 10 12 14 16 18 20 22
0%

Figure 3

PLACEMENTS

The goal of Project Bridge is to link disabled youth graduating from secondary schools with community training/educational resources and ultimately, with jobs in competitive or non-competitive employment settings. The philosophy grounding this effort maintains that many disabled individuals exiting the secondary public school system may require additional training and or education to be truly viable in the competitive job market. Thus, by establishing linkages with community training/educational resources, the youth can then proceed with job placement activities once the necessary skills have been acquired. This section will describe placement activities at both levels: 1) training/educational sites, and 2) employment sites.

A. Training/Educational Placements

The number of youth requiring additional training and/or educational experiences prior to job placement closely approximates the number originally projected. As of 10/1/86, 139 youth were linked to community resources prior to job placement. Table 1 presents the actual numbers of these placements along with a typology of the resources utilized. (see Table 1)

An examination of Table 1 reveals a large reliance upon job skills training, work experience activities, and specific vocational training; a finding consistent with clients' self-reported barriers to employment. Also, of all training/education placed clients, 35% (N = 45) were enrolled in a second program, and 7% (N = 9) went on to a third training placement. While these double and triple placements do not alter the total number of Project Bridge clients who received post secondary training/educational programs (N = 139), it does demonstrate that project staff has actually developed 195 successful linkages with these post secondary resources to date.

Job Placements

The total number of Project Bridge participants who are job placed (as of 10/1/86), the type of employment site and the mean hourly wage from those placements is presented in Table 2. While the individual business and organizations comprising the "Competitive Employment" category are too numerous to list, they continue to represent the major typologies presented in the second annual report, including: food preparation, janitorial/custodial, clerical, maintenance, but with the addition of several government and National Guard positions. (see Table 2)

Table 2 demonstrates that 44% of the entire Project Bridge sample of 214 youth have been job placed (gained work experience and earned wages) as of 9/30/86. Sixty percent of the original Bridge sample of 150 youth have been job placed.

Table 1

POST SECONDARY TRAINING AND EDUCATIONAL PLACEMENTS

RESOURCE SITE NAME	RESOURCE TYPOLOGY	# FIRST PLACEMENT	# SECOND PLACEMENT	# THIRD PLACEMENT
MARICOPA SKILLS CNTR.	V	19	5	0
PERRY REHAB. CNTR.	J,L,R,C	3	1	0
DEVEL. DISSABILITIES	*	7	5	0
VACATIONAL REHAB.	*	27	8	0
R. & D. TRAINING	L,R,J	6	1	2
ON THE JOB TRAINING	J	2	4	0
MESSA COMMU. COLL.	E	1	0	0
GARDEN PARK	L,J,E	5	0	0
PHEONIX JOB CORP.	J,E	1	0	1
ASSO. RETARDED CITI.	RE	1	5	1
PROJECT INTERFACE	J	1	3	0
MESSA VOC. TECH.	V,E	1	2	0
EMPLOYERS HOTLINE	C	2	1	0
EASTER SEALS	RE,C	2	2	0
SUMMER YOUTH PROG.	J	38	2	1
ARIZ. STATE UNIV.	*	1	0	0
AZTEC	J,L	1	0	0
PROJ. WITH INDUSTRY	J	5	9	6
TRI CITY MENTAL HEA.	C	2	1	0
CALL A TEEN	V,J,C	1	0	1
MARICOPA TECH.	V,E	1	0	1
THUNDERBIRD HOSP.	J	1	0	0
SOUTH MENTAL HEALTH	C	2	1	0
CAMMELBACK HOSP.	C,R	1	0	0
SCOTTSDALE COMMU. COL.	E	1	0	0
CMI RESIDENTIAL	C,R	1	0	0
GETZ SUMMER SCHOOL	RE,E	0	1	0
TEMPE YOUTH CNTR.	J,E,R,C	0	2	0
FRIENDLY HOUSE	C	0	1	0
VALLEY OF THE SUN	V,J	2	0	0
PILOT PARENTS	C,L	5	2	1
	TOTAL	139	47	14

KEY

L = LIVING SKILLS
E = EDUCATION
C = COUNSELING
RE = RECREATION

J = JOB READINESS SKILLS
R = RESIDENTIAL
V = VOCATIONAL SKILLS
* = ALL SERVICES

Table 2

EMPLOYEMNT PLACEMENTS

EMPLOYMENT TYPE	# FIRST PLACEMENT	# SECOND PLACEMENT	# THIRD PLACEMENT	AVERAGE $/HOUR
COMPETITIVE EMPLOYMENT	55	13	2	$3.77
SHELTERED WORKSHOP (Work Adjustment, WSI)	14	2	0	PIECE RATE
JOB TRAINING PARTNERSHIP ACT (JTPA)	18	0	0	$3.35
TOTAL	87	15	2	

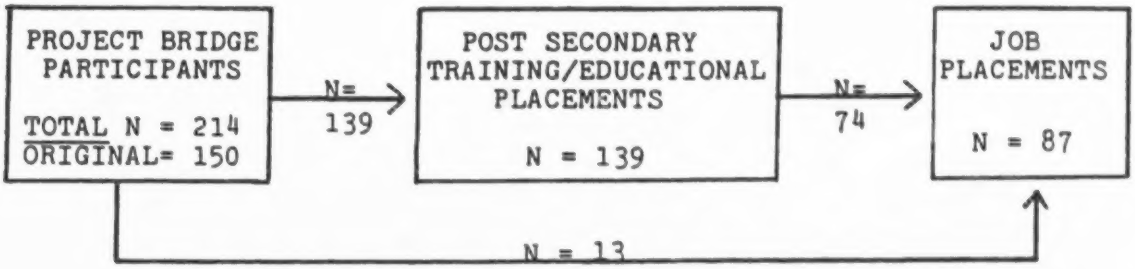
Comparing these placement figures to the 60-80% national unemployment rate for the same age youth, hints at the outcome effectiveness of this transition program.

Table 2 also indicates that of the 87 youth who were job placed, 14% (N = 15) were placed at a second employment site, and 3% (N = 2) at a third. Again, while the actual number of Project Bridge clients who were job placed remains at 87, these double and triple placements of selected clients means project staff actually secured 104 employment placements to date. Although job placement for youth currently enrolled in Project Bridge will continue throughout the remainder of Year 3, the placement numbers presented in Table 2 already meet or exceed those stipulated in the original proposal.

Of equal significance to the total placement figures; however, is data which evaluates how useful the Project Bridge Model is in managing the transition process in its entirety. It was anticipated that the majority of graduating disabled youth would not proceed directly to job placements, but would first require additional training/educational experiences. The Bridge Model was designed in part to specifically manage and coordinate this transition process to increase the probability of subsequent employment.

C. Training-to-Employment Placements:

Of the 139 clients who were linked to pre-employment training and/or educational resources, 57% (N = 74) have been job placed (see figure 4 below).


PROJECT BRIDGE PARTICIPANTS
TOTAL N = 214
ORIGINAL= 150
N= 139
POST SECONDARY TRAINING/EDUCATIONAL PLACEMENTS
N = 139
N= 74
JOB PLACEMENTS
N = 87
N = 13

TRAINING TO EMPLOYMENT
Figure 4

Although this figure meets the rate projected in the Bridge proposal,it is lower, in a relative sense, when compared to the over-all placement rate this project has attained to date. Several factors may be identified that contribute to this statistic. First, many youth enrolled in training sites are still involved in those courses. Obviously, job placement cannot occur until after graudation. Second, 14 youth who were linked with Summer Youth Programs (receiving job skills and work experience training) were not graduating during the 85/86 school year and returned to their respective high schools following their summer training programs. Third, a number of youth (N = 13) were job placed as no current openings in relevant community resource sites were available. For example; the Arizona State Department of Economic Securities (Developmental Disabilities and Vocational Rehabilitation) could provide needed sheltered workshop or vocational skills training only after a 1-3 year waiting period. Rather than have the youth sit idle during this waiting period, they were job placed.

CONCLUSION

The goal of this project is to establish linkages between graduating disabled youth with community training/educational resources and ultimately with employment sites. An automated Clearinghouse of community resoure information and client spreadsheets were developed to asist with these goals.

Outcome date reflect the usefulness a computerized bank of information may have for those assisting disabled youth with their school to work transition. This information is especially relevant for those dealing with rural populations. Current and accurate information concerning community resources is vital if costly and time consuming and inappropriate referrals are to be avoided.

Other issues relevant for rural populations include:

1. emphasis on transportation networking,
2. establishment of parent training workshops within the community to both disseminate information and discuss parental responsibilities,
3. establishment of community support groups.

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Presenters: Margaret Turner, M.A.
Barbara Ludlow, Ed.D.
Wilfred Wienke, Ed.D.

Special Education Program
504 Allen Hall
West Virginia University
Morgantown, WV 26505

TRAINING FIELD-BASED PERSONNEL TO SUPERVISE ON-THE-JOB PRACTICUM EXPERIENCES IN RURAL AREAS

National studies have revealed that present patterns of teacher supply and demand are pointing to critical teacher shortages in many areas by 1990's (Darling-Hammond, 1984). The attrition rate of qualified, experienced teachers has grown from 30% to 60% in recent years due to teacher dissatisfaction with bureaucratic interference with teaching and lack of administrative support (AFT, 1983; NAE, 1983). A series of reports calling for reform in education have stressed the need for restructuring of teacher education programs (Carnegie Report, 1986; Holmes Group Report, 1986; NCATE Report, 1985). Reform of teacher training programs is seen as a critical component of the movement to improve the American system of public education.

The preparation of educational personnel to serve handicapped students is a national priority. Several studies have shown a shortage of appropriately trained teachers for special education programs across the country (Helge, 1981; Smith-Davis et.al.,1984; Sontag & Button, 1980). These shortages are compounded by the use of temporary out-of-field permits to hire staff, a practice that threatens the quality of services (Smith-Davis, 1985; Pipho, 1986). The demands of teachng, coupled with the stresses of a special education program, leads to "burnout" and teacher turnover (Bina,1981; Marrs, 1983). the problem is especially critical in rural areas, where attrition rates for special educators may be as high as 50% yearly (Helge, 1984). In addition, many students enrolled in special education teacher training programs are already employed as teachers and are unable to pursue full-time studies (Spencer, Noel & Boyer-Schick, 1985). These problems must be addressed by personnel preparation programs if the continuing demands for special educators is to be met.

Another persistent problem has been retaining trained and certified teachers in the special education work force withing the state. A survey of Directors of Special Education (Ludlow, 1985) revealed that over two-thirds of the county school systems were experiencing difficulty in recruiting and retaining special educators, and that the turnover rate was nearly 100% every three years. A recent study indicated that job stress contributes to burnout and teacher job dissatisfaction among special educators in rural school systems in West Virginia (Knowles, 1980).

The Special Education Program at West Virginia University has been state approved and National Council for Accreditation of Teacher Education (NCATE) accredited to offer graduate degree/teaching certification programs in Mental Retardation, Learning Disabilities and Behavior Disorders for two decades. These programs are available on campus and also at off-campus locations through the Office of Extension and Continuing Education. Coursework is offered at five (5) sites in the WVU service area comprised of 33 counties in the northern half of the state. All classes are offered in the late afternoon and evening to allow students employed as teachers on temporary permits to attend.

Practicum experiences have been available during the academic year, across summer sessions and more recently on-the-job. Over 50% of the current student enrollment is off-campus and fully 90% of all students are employed full-time in teaching positions, creating a heavy demand for non-traditional practicum experiences. The summer practicum experience is dependent upon the willingness of county school systems to offer summer programs for handicapped students and ability of the university to provide qualified supervisory personnel. The demand for summer practicum has reached a point where the Special Education Program no longer has the resources to locate enough placements or to provide sufficient supervision. In addition, many students who have family responsibilities find it difficult to schedule six (6) weeks away from home during the summer months to complete practicum requirements. In 1983, WVU was awarded a Personnel Preparation Grant to develop and implement a Clinical Practicum Project to provide practicum experiences in on-the-job settings. The availability of clinical practicum has reduced the demand for summer practicum, but the overall increase in enrollment and the increased demand for on-the-job practicum experiences has created a need for supervision that cannot be met by existing faculty resources. Practicum enrollment data indicate that the majority of students request the summer on-the-job practicum option. The practicing teacher is faced with real problems that cannot be duplicated in simulated settings such as summer programs or laboratory schools (Grant et al, 1979). Collaborative training projects that involve school systems directly in the training of teaching personnel have been advocated as a method of providing practitioner input into preservice progams (Griffin, 1986; Pugach & Allen-Meares, 1985; Yarger & Mertens, 1980). On-the-job practicum experiences thus can take advantage of the opportunities for more realistic and functional training experiences and performance appraisal inherent in the classroom setting as well as improve the accessibility of training programs.

Institions of higher education have traditionally failed to commit necessary resources to practicum supervision (ATE, 1986a). Supervisory duties are given low priority status by faculty members, with the result that inadequate time and effort is devoted to working with practicum students (McIntire, 1983). Studies have shown that the cooperating teacher is the key to effective practicum supervision (Zeichner, 1980; Zimpher et al, 1980). Practicing master teachers have years of training and experience to use in supervising practicum experiences (Blumber, 1980). They also have knowledge of a particular school system, including administrative policies, available resources, and contact persons. But teachers need direct instruction in skills for observing lessons, providing feedback, and evaluating teaching performance to be most effective as supervisors (Emans, 1983). A training program is needed to develop supervisory skills systematically with practice and feedback over time.

PROGRAM CONTENT

The existing on-the-job practicum program consists of a pre-practicum orientation session and a practicum experience provided to eligible students pursuing teaching certification in Special Education in the areas of Mental Retardation, Learning Disabilities, or Behavior Disorders. This practicum experience is offered upon completion of all other required coursework in each area and only to students currently working in the field on temporary teaching permits. It meets all guidelines for professional experiences in teacher education established by the Association of Teacher Educators (ATE,1986a).

The practicum experience is organized around competency-based teacher education (CBTE) principles. CBTE is an instructional delivery system in which competencies are specified in behavioral terms and alternative assessment activities are scheduled (Houston & Howram, 1972). Teacher training programs that are competency based provide a flexible structure permitting individualization to meet specific student needs (Blackhurst, 1977). They also offer more objective assessment procedures for measuring student competency attainment by zeroing in on those skills in which students need more practice and refinement and by facilitating identification of alternative activities for demonstrating improvement (Berdine, Cegelka & Kelley, 1977).

The student and practicum supervisor schedule at least four observation sessions for the semester in which the clinical practicum is planned. Wherever possible, observations are scheduled for sites in nearby locations to reduce supervisor travel distance and time. During an observation visit the supervisor spends at least one-half day in the practicum student's classroom to observe and evaluate teaching and discuss the student's progress in competency attainment. The supervisor maintains contact by telephone or visit with the master teacher. S/he writes a summary evaluation of the students overall strengths and weaknesses in teaching, reviews all documentation provided by the master teacher and assigns the final grade.

The Practicum Handbook summarizes all requirements, procedures, and forms needed to document and evaluate competencies. The initial preassessment of competencies is jointly determined by the practicum student, the cooperating teacher and the practicum supervisor. Knowledge competencies are met by satisfactory completion of prescribed coursework for the area of specialization with a grade of B or better in each course. Performance competencies are assessed by a behavioral Q-Sort form on which students rate their proficiency on specific program competencies indicating in which areas of teaching they excel or need improvement. The preassessment process permits the practicum student to develop an Individual Personnel Training Plan (IPTP) outlining those competencies which must be demonstrated during the practicum experience to satisfy university requirements. The IPTP insures recognition of competencies acquired through on-the-job experiences while providing opportunity to practice and refine other skills to improve the student's overall teaching ability. Students are required to maintain data on their progress in achieving each of the targeted competencies by indicating the amount of classroom time spent and the type of activity engaged in.

The student and master teacher agree upon a weekly schedule for observation sessions and interviews. During observation sessions, the master teacher spends at least one hour in the practicum student's classroom to evaluate teaching and validate practicum competencies. During interviews the master teacher and student discuss the students progress (in person or by telephone) in competency attainment, strategies for improving classroom teaching, and other problems. The master teacher documents that all fifty (50) program/competencies have been demonstrated and that target competencies selected by the student for the IPTP have been completed. S/he writes a summary evaluation of the student's overall strengths and weaknesses in teaching and submits all documentation to the practicum supervisor.

The Special Education Program provides practicum supervision following techniques of the clinical supervision model (Acheson & Gall, 1980; Cogan, 1973; Goldhammer, 1969) which focuses on observation and evaluation of teaching to foster professional learning and growth (Garman, 1986). Measurement of performance in terms of behavioral objectives (Piper & Elgart, 1979) allows practicum supervisors to make data-based decisions about student acquisition of program competencies. Arranging for observation of students in their work settings allows the program to take advantage of an optimal setting for demonstrating and proving teaching skills (Grant, et al,1979; Russell, 1971). Clinical supervision of students on-the-job permits project staff to offer more realistic and functional training experiences for special education teachers.

APPLICATION AND ELIGIBILITY

The county school system recommends a certified master teacher in their employ or contracts with another agency (school system, regional educational service agency, college, or private organization) to supply one. To be eligible to supervise practicum, the cooperating teacher must meet the following criteria:

1. Possession of a valid West Virginia teaching certificate in the area of specialization in which the practicum is to be conducted.
2. Completion of a Master's Degree in special education in that area of specialization.
3. Teaching experience of at least three academic years in that area of specialization.
4. Authorization from the superintendent of schools in the district where employed for release time from instructional responsibilities to supervise students.
5. Participation in an orientation session for cooperating teachers.

The practicum coordinator reviews the application to determine if all requirements have been satisfied.

RESPONSIBILITIES

The cooperating teacher is responsible for scheduling at least twelve (12) observations (approximately one visit per week), lasting one to two hours in the practicum students classroom. The teacher assists in the development of an Individualized Personnel Training Plan (IPTP); observes and documents the demonstration of all practicum competencies; and, observes, evaluates and provides written feedback on lessons observsed. This insures that student performance is assessed by a practicing teacher certified in the area of specialization who is also familiar with the constraints of the particular school system and rural geographic region. The cooperating teacher is also in periodic contact with the university supervisor to better coordinate the practicum experience and to receive feedback and suggestions on supervisory skills.

ORIENTATION

Prior to the practicum experience an orientation session is held for students, cooperating teachers, and university supervisors. At this time the practicum coordinator and assistant(s) describes procedures in the Practicum Handbook, explains the documentation of compencies, instructs cooperating teachers and supervisors in observation and supervision techniques, and establish a schedule of observation visits.

The cooperating teacher, while being a certified master teacher has had little if any supervisory training. It is at the orientation session that they receive suggestions for effective supervision. The Practicum Handbook is discussed with emphasis on the forms the cooperating teacher must fill out:

1. Practicum Competency Validation Form

2. Lesson Observation Form
3. Weekly Progress Form
4. Cooperating Teacher Time Log
5. Summary Evaluation
6. Practicum Evaluation

The on-the-job practicum is unique because the students are experienced teachers and the cooperating teacher is often a colleague. Therefore this practicum requires unique superisory skills. The orientation session for the cooperating teacher includes discussion and simulations (Figure 6). The cooperating teacher is given the opportunity to answer and discuss questions depicting possible problems and situations. A simulated classroom is presented with the teacher given the opportunity to discuss possible solutions. The teacher is asked to read a series of statements to distinguis between statements which are judgemental and statements which are descriptive.

OBSERVATIONS

During scheduled observation visits, the practicum student presents a lesson plan for any activities to be observed. The cooperating teacher observes the lesson and makes a written record on the Daily Observation Form (see Figure), according to the following steps.

1. review lesson plans
2. record facts, not judgements on form
3. describe events in sequence
4. look for cause-and-effect relationships
5. make appropriate comments on back of form or separate sheet

Immediately following the lesson, observer and student discuss the lesson, using techniques of clinical supervision (Acheson & Gall, 1980):

1. analyze: describe the performance in terms of observable patterns;
2. interpret: compare with objective or program standards;
3. decide: determine changes to be made and the steps to make these changes;
4. recommend: outline potential activies,strategies, and resources;
5. summarize: use specific praise for performance and growth.

In addition, the cooperating teacher documents the completion of specific teaching compentencies (see figure 1) as the student demonstrates each one, and assists the student in performing the tasks specified in the IPTP (see Figure 2). The cooperating teacher also fills out a Weekly Evaluation Form (see Figure 3) to indicate general teaching progress.

EVALUATION

Upon completion of all competencies at the end of the practicum experience, the practicum students and both supervisory personnel evaluate the student's performance as well as the operation of the Clinical Practicum Program.

1. Practicum Competency Rating

Attainment of practicum competencies by each practicum student is rated independently by the student and both supervisory personnel as stron, adequate, or weak This information is used to assess the student's progress as well as for research analyzing the percentages of agreement on student proficiency across raters.

2. Summary Evaluation

The cooperating teacher and university supervisor each complete a written summary evaluation on the practicum student, documenting special teaching strengths, areas that need further development, and skills appropriate to the grade level/area of exceptionality (see Figure 4). The supervisor assigns a grade of Satisfactory, Unsatisfactory, Incomplete or Withdrawal. These forms become part of the student's permanent file and serve as a data base for recommendations for future employment.

3. Practicum Evaluation (Cooperating Teacher Form)

The cooperating teacher rates the practicum as a meaningful learning experience (see Figure 5). Supportive comments and constructive criticisms provide important feedback for program modification.

PRELIMINARY RESULTS

The Clinical Practicum Program has been shown to be an effective model for supervising teachers on-the-job in rural areas, however a number of issues remain concerning the cooperating teacher in a supervisory role:

1. how can certified master teachers be found to supervise? (rural areas face a shortage of qualified, trained personnel in some areas of specialization);
2. how can a scedule of observations be arranged to maximize direct supervisory contact and minimize travel time? (isolated rural sites and conflicting teaching schedules);
3. how can schedule of observations accomodate unplanned interruptions? (winter weather conditions and school emergencies may interfere with planned visits and require rescheduling at another date);
4. how can cooperating teachers be trained to meet the requirements of supervision?(teachers cannot be required to take a course in supervision and many live too far from the university to receive training in a centralized location);
5. how can competency validation procedures be rewritten to permit reliable documentation of proficiency? (traditional

procedures for assessing teaching skills rely on subjective judgement rather than objective evidence);

6. how to effectively deal with the student who is unable to meet the practicum competencies? (documentation to provide evidence that the student is unable to meet the competencies is required).

The debriefing session held with the cooperating teachers indicated a strong committment to the continued development and use of the on-the-job practicum model. The positive attitude and willingness to address the issues involved in effective clinical supervision illustrate the effectivness of the on-the-job practicum model to the training of special educators in rural areas.

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Figure 1.

PRACTICUM COMPETENCY VALIDATION

DATE	Competencies	Assessment Procedur
	A. PRETEACHING	
	I. Special Education Foundations	
________	a. identifies historical and current trends in services for exceptional individuals	coursework/discussion
________	b. states definition, incidence, and diagnostic criteria for categories of exceptionality	coursework/discussion
________	c. describes intellectual, social, emotional and physical characteristics of exceptionalities	coursework/discussion
________	d. discusses education, social and vocational services/programs for exceptional individuals	coursework/discussion
________	e. uses appropriate descriptive terminology in speech and writing	coursework/discussion
	II. Assessment Techniques	
________	a. selects formal assessment instruments to collect data on academic performance	product/casestudy
________	b. modifies assessment procedures to accommodate pupil needs and testing situations	product/casestudy
________	c. develops informal assessment devices to diagnose pupil learning needs	product/casestudy
________	d. interprets data collected from various sources to plan instructional programs	product/casestudy
________	e. selects procedures to evaluate pupil progress and instructional effects	product/casestudy
	III. Instructional Planning	
________	a. develops long-term objectives for pupils in cognitive/affective/psychomotor domains	IEP
________	b. develops short-term objectives including measurable behavior/conditions/criteria	IEP
________	c. task analyzes curriculum goals to determine instructional sequences	lesson plan
________	d. writes lesson plans to reflect individual pupil performance objectives	lesson plan
________	e. uses a variety of methods and materials appropriate to pupil needs	lesson plan
	IV. Classroom Organization	
________	a. controls environmental conditions for pupil comfort and facilitation of learning	observation
________	b. arranges room to provide a variety of learning settings (centers/carrels/groups)	observation
________	c. plans and conducts individual and group activities simultaneously	observation
________	d. schedules and paces activities to make efficient use of teacher and pupil time	observation
________	e. uses supportive personnel effectively to facilitate instructional delivery	product/example

DATE	B. TEACHING	
	V. Classroom Management	Behavior Management Plan
______	a. positions pupils to minimize behavior problems and facilitate	observation
______	b. establishes classroom procedures and routines to develop self-discipline	observation
______	c. manages individual and group behaviors to provide a positive learning climate	observation
______	d. uses a variety of reinforcing events according to individual pupil preferences	observation
______	e. applies positive and negative contingencies immediately and consistently	observation
	VI. Instructional Programming	
______	a. gives instructions/directions to orient pupils to lesson objectives	observation
______	b. presents instruction in sequence so pupils respond with few mistakes	observation
______	c. uses questioning strategies/prompts to elicit pupil responses and discussion	observation
______	d. provides verbal and nonverbal feedback to pupils on performance	observation
______	e. provides sufficient practice for generalization/maintenance of skills	observation
	C. POSTTEACHING	
	VII. Instructional Evaluation	
______	a. identifies and analyzes errors to develop remedial strategies	product
______	b. uses continuous assessment to measure pupil progress toward mastery of objectives	product
______	c. analyzes pupil performance data to redefine objectives/redesign programs	product
______	d. rates/assigns grades to pupils accurately and equitably from recorded data	product
______	e. develops system to report progress to pupils, parents, and school personnel	product
	D. OTHER PROFESSIONAL ACTIVITIES	
	VIII. Interpersonal Communication	
______	a. communicates information/data at formal and informal meetings	SBAT meeting
______	b. prepares formal and informal written diagnostic and evaluation reports	product
______	c. provides consultation services to parents and professionals	documentation
______	d. designs and conducts training for parents and professionals	documentation
	IX. Professional Development	
______	a. recognizes teaching strengths/weaknesses and has realistic expectations for self	IPTP
______	b. accepts and uses suggestions and criticisms from other professionals	completion of practicum

DATE		
________	c. seeks assistance from personnel or references for self-improvement	resource person contact, documentatio
________	c. participates in professional activities (conferences, organizations. subscriptions)	documentation
________	e. understands legal principles and due process procedures	documentation
	X. Nonteaching Responsibilities	
________	a. performs administrative tasks and nonteaching duties efficiently	
________	b. complies with school rules, policies and regulations	
________	c. dresses/behaves professionally according to setting and activity	
________	d. demonstrates regular and punctual attendance at assigned activities	
________	e. locates resources, makes referrals and coordinates services of other disciplines	

Practicum Student

Cooperating Teacher

University Supervisor

Figure 2.

INDIVIDUALIZED PERSONNEL TRAINING PLAN

Competencies

The following competencies must be demonstrated during the practicum experience:

1. ______________________________
2. ______________________________
3. ______________________________
4. ______________________________
5. ______________________________
6. ______________________________
7. ______________________________
8. ______________________________

The plan of action must be developed and approved by the supervisors by __________________________.
(Date)

Plan of Action

The student and supervisor will follow the plan of action outlined below:

Competency	Demonstration Procedure	Date of Completion

The plan has been developed and mutually agreed upon by:

Date	Practicum Student	Cooperating Teacher	University Supervisor
----	-----------------	-------------------	---------------------

Figure 3.
WEEKLY PROGRESS FORM

Practicum Student ____

Cooperating Teacher ___________________ Week of ______________________

School ________________________________

Rating: 1 = Excellent
2 = Very Good
3 = Satisfactory
4 = Needs Improvement
5 = Unsatisfactory

1. Evidence of Appropriate Planning and Organization	1	2	3	4	5	NA
2. Appropriate Use of Teaching method	1	2	3	4	5	NA
3. Knowledge of and Appropriate Use of Content	1	2	3	4	5	NA
4. Classroom Control	1	2	3	4	5	NA
5. Involvement of Students	1	2	3	4	5	NA
6. Relationships with Students	1	2	3	4	5	NA
7. Use of Approriate Evaluative Techniques	1	2	3	4	5	NA
8. Enthusiasm for Teaching	1	2	3	4	5	NA
9. Management of Time	1	2	3	4	5	NA

10. Cooperating Teacher's Comment/Suggestions ____________________________

____

____

____

____

11 . ______ check here if you want university supervisor to contact you.

12. What are the best times for the supervisor to reach you ___________.

Figure 4.

SUMMARY EVALUATION
COOPERATING TEACHER

Please answer the following questions:

What special teaching skills have you observed in this practicum student?

What teaching skills should this practicum student continue to develop?

Do you think this practicum student is/will be successful in a teaching position at this grade level for this area of exceptionality? Explain:

SIGNED:

Cooperating Teacher: ____

Practicum Student: ____

Date: ____________________________

Figure 5.

WVU SPECIAL EDUCATION
PRACTICUM EVALUATION
(Cooperating Teacher Form - Graduate Program)

Circle your answer to each item as yes (Y), no (N), undecided (U).

The student's specialization was:
- a. Mental Retardation
- b. Learning Disabilities
- c. Behavior Disorders
- d. Severe/Profound Handicaps
- e. Gifted Education
- f. Early Intervention

The practicum option was:
- a. full-time placement
- b. summer placement
- c. on-the-job placement

A. PRACTICUM STUDENT
1. Was the student properly prepared for practicum? Y N U
2. Was s/he responsive to suggestions/criticisms? Y N U
3. Did s/he demonstrate knowledge of special education? Y N U
4. Did s/he demonstrate skill in instruction/management? Y N U
5. Did s/he demonstrate professional attitude/behavior? Y N U
6. Did the class benefit from contact with the student? Y N U

B. UNIVERSITY SUPERVISOR
1. Did cooperating teacher understand her/his role? Y N U
2. Did s/he have sufficient training/experience? Y N U
3. Was the number of observation visits made adequate? Y N U
4. Was the length of time spent per observation sufficient? Y N U
5. Did the teacher have good rapport with the student? Y N U
6. Did the teacher's observations agree with yours? Y N U

C. UNIVERSITY PROCEDURES
1. Did orientation prepare you for practicum? Y N U
2. Did responsibilities make reasonable time demands? Y N U
3. Did the Handbook clearly explain procedures? Y N U
4. Did competencies reflect skills needed by teachers? Y N U
5. Did observation forms accurately depict performance? Y N U
6. Did evaluation forms fairly assess competencies? Y N U

D. PRACTICUM EXPERIENCE
1. Was the practicum a meaningful learning experience? Y N U
   Explain:

Would you serve as a Cooperating Teacher again? Y N U
Explain:

How would you improve/change the practicum experience?

How would you improve/change university requirements?

Figure 6.

COOPERATING TEACHER ORIENTATION MATERIALS

Questions About Clinical Supervision

1. What should you do if there is a disagreement between you and the practicum student?

2. How can the practicum student and the cooperating teacher resolve their disagreements?

3. Should a cooperating teacher try to change a teacher's style?

4. What can cooperating teachers do to help teachers who are highly defensive?

5. How should the cooperating teacher respond to direct questions from the practicum student?

6. Is there a difference in the techniques used when working with an experienced teacher?

7. Isn't an observer in a classroom likely to be obtrusive?

8. Is there ever a time when the supervisor should interfer with the lesson being taught?

9. What can you do to improve your supervisory techniques?

Case Study
The Case of Ms. Green's Disruptive Classroom

Ms.Green is in the seventh year of her teaching career. She teaches a special education class. The school is a rural school. By the end of the first marking period it has become clear that there is a problem in Ms Green's class. She has taken up the policy of sending children to the principal's office for misbehavior. By November she is sending one to two students a day for disciplinary action. The principal is annoyed. Students are upset. And Ms. Green is very defensive about the situation. She will be beginning her on-the-job practicum and you will be her cooperating teacher. Discuss the apparent problems and how you would go about your supervision.

TO DISTINGUISH BETWEEN DESCRIPTIVE AND JUDGEMENTAL STATEMENTS;

1. The teacher is chastising the child.
2. The boy is staring out the window while resting his head on his hand.
3. The boy does not like the lesson.
4. The teacher has his back to the class.
5. The girl is confused by the teacher's explanations.
6. The teacher was in a bad mood four of the seven days he was observed.
7. The teacher talked to 14 students during the first 20 minutes of the lesson.
8. The teacher didn't move around the room.
9. The teacher was too harsh with Mike.
10. The teacher ~~did~~ asked too few questions.

Each of the following statements have been said to you. Regard each statement as an invitation to respond as a concerned listener. That is, make the choice which seems to you would result in the other continuing to elaborate on their story.

1. "I don't know...What should I say? I mean, I want to talk about what's happened, but it's... Well I just don't know where to begin."

   a. You should start at the beginning.
   b. It's up to you.
   c. Where do you want to begin?
   d. I know; I have a hard time starting to explain things sometimes.
   e. If you don't know, who does know?

2. "I don't understand what's happened? Everything was going so well, and all of a sudden she just left...walked right out, you know? I must have done something...or said something...?"

   a. What did you do? You must have done something?
   b. Where did she go? Why didn't you stop her?
   c. That's really tough; it makes you feel like you can't trust yourself.
   d. What do you think happened?
   e. Is it guilt that you are feeling, or just plain unhappiness?

3. "Ive done everything they asked me to do...I even tried to change my attitude, cause Iknow they want me to be more positive. But here I am again back where I started. Nothing seems to go right for me!"

- a. That may be just a phase you are going through.
- b. Maybe you're just trying too hard... What do you think?
- c. Where does it say, you've got to please everyone?
- d. What is it like for you to have things not go right?
- e. Do you think they're being too hard on you?

4. "I don't know what I could have done...Imean we used to get along so well...but now...

- a. I'm sure it isn't your fault.
- b. Now she doesn't like you anymore.
- c. Go on tell me more.
- d. Everybody gets upset now and then.
- e. Now you have doubts about how well you really did get along

5. I mean just what is his problem? I wish he would just get off my back.

- a. Why did you get yourself in this position?
- b. I know... I hate it when people get on me about something.
- c. What effect is he having on you?
- d. Maybe he'll get the message and go away.
- e, Is he on your back all the time or only under certain situations?

LESSON OBSERVATION FORM

Student: ____________________ Date: ____________ Observer: ______________
Area: ______________________ Lesson: ______________________

PREPARATION
Planning and Objectives

____

Organization and Sequencing

____

Instructional Materials

____

Classroom Environment

____

INSTRUCTION
Motivation/Rapport

____

Use of Instructional Materials

____

Behavior Management

____

Pupil Evaluation

____

Practical Application

____

PUPIL RESPONSE
Participation

____

Enthusiasm and Interest

COOPERATING TEACHER TIME LOG

NAME ________________________________ SEMESTER ______________

DATE	SITE/SUTDENT	TRAVEL MILEAGE/TIME	EXPENSES	OBSERVATION TIME	COMMENTS

Rebecca Pruett
Gadsden County School Board
P.O. Box 818
Quincy, FL 32351

INTERAGENCY PLANNING FOR PREKINDERGARTEN EXCEPTIONAL CHILDREN IN RURAL FLORIDA

BACKGROUND:

Florida is a state of widely diverse demographic areas, each with its own unique characteristics and political boundaries. The problems encountered by school districts providing education and related services to young exceptional children are as varied as the communities they serve.

The Florida Bureau of Education for Exceptional Students has funded interagency pilot projects in a large-sized, a medium-sized, and a small-rural school district to develop interagency planning strategies in their local communities and serve as models for other like-sized school districts in the state.

The Gadsden Prekindergarten Handicapped Interagency Project was funded in 1985 to focus on demonstration of effective interagency coordination in small-rural Florida school districts. The unique problems of providing of comprehensive services in this setting were identified through a survey of the 39 rural districts across the state. Survey results indicated that while both single and multi-county councils exist in a few rural districts, the majority of Florida school districts of this demographic structure have no interagency activity. The establishment of interagency councils in these small-rural districts is the primary emphasis of the Gadsden Project.

PURPOSE:

This session will:

1) provide an overview of Florida's efforts to develop a comprehensive plan for maximizing services to preschool handicapped children through the interagency council model

2) present ideas for identification of constraints which impact upon expansion of prekindergarten programs in rural communities and how to address those constraints

3) describe a general pattern of development for prekindergarten interagency councils in rural communities with limited resources

4) conclude that the interagency council model is a viable strategy for development and expansion of programs for young handicapped children in rural communities.

TYPE OF PRESENTATION:

The session will utilize a videotape and overhead transparencies during a lecture and discussion format.

CONCURRENT SESSIONS

THURSDAY, MARCH 19, 1937

2:40 - 3:40 PM

Judy Eklund
Irene Keithcart
Vermont Department of Education
Montpelier, VT 05682

Quality Indicators for Programs for the Emotionally Disturbed: A Process and Model

Many rural states are faced with the dilemma of how to best provide educational services to students who are diagnosed as emotionally disturbed. Nationally, program development for this population of handicapped students has been slow and most challenging. Vermont is no exception to other rural states on the issue of serving students who are emotionally disturbed. Over the last four years we have initiated several activities at the state level to assess the need for services, to increase the number of programs and to improve existing programs.

The purpose of our presentation will be to describe several statewide initiatives related to emotional disturbance that have been underway over the last few years. Several reports will be presented in summary form including the following:

> Vermont's Emotionally Disturbed Students: A Description of Current Issues and Services.
>
> A Service Delivery Model for Vermont's Emotionally Disturbed Students

Both of the reports listed above were prepared by a statewide steering committee that was appointed in 1983 by the late Director of the Division of Special Education, Ms. Jean Garvin. The work of this committee has continued under Dr. Ted Riggen who was appointed as Director in 1984. Under Dr. Riggen's leadership, the committee was charged with developing a model program description and quality indicators for programs serving emotionally disturbed children and youth. The committee followed the Vermont adaptation of the Johnson-Gadberry Program Definition Model Program and the quality indicators that have been developed are currently being finalized by the committee. The quality indicators will serve to guide program development, program improvement and on-going program evaluation. Our presentation will review quality indicators for the following program components:

I - Program Philosophy
II - Program Planning and Coordination
III - Student Assessment: Program Eligibility and Education Program Planning
IV - Content
V - Method
VI - Staff
VII - Physical Plant Requirements
VIII - Parent Involvement
IX - Staff Development
X - Interagency and Advocacy Group Interaction
XI - Transportation
XII - Instructional Resources
XIII - Community Relations and Involvement
XIV - Fiscal Resources

In conclusion:

1) The purpose of our presentation will be to share information regarding the current issues and service needs relating to seriously emotionally disturbed students.

2) Our objective is to provide knowledge at an awareness level of a process and model that may assist other administrators in long range planning related to developing program descriptions.

3) It is our goal to discuss the process followed and the model from a perspective that will emphasize rural implications.

12-18-86/mam

Darcy Miller
Carroll College
Helena, MT 59625

* Family-Professional Relationships
* Innovative Inservice Training
* Assessment/Diagnosis

Positive Parent-Professional Partnerships: Elements for Success

Developing and implementing appropriate educational programs for students with handicaps is always a challenging task for parents and professionals. This task can often become one of frustration when programs must be developed for students with low-incidence handicapping conditions (i.e. autism, severe mental retardation) who reside in rural areas. This frustration can lead to the development of negative parent-school relationships which, in turn, may result in destructive, rather than constructive action on the part of these adults. Problems with the parent-school relationship will impede the process of developing and implementing educational programs. It is imperative, therefore, that parents and professionals learn how to develop positive partnerships for the benefit of their children and students. This presentation will provide participants with practical suggestions and guidelines on developing and maintaining positive parent-school partnerships, even under stressful conditions.

The presentation will begin with an overview of the myths, assumptions and barriers that characterize strained parent-professional relationships. Participants will develop an understanding of what parents and professionals need in order to work cooperatively, and how these needs affect the entire process of relationship-building. Participants will become aware of the relationship between parent/professional needs and the multidisciplinary evaluation of the student. The presentor will provide guidelines on establishing common, shared perceptions of the student's skills and abilities. The importance of these shared perceptions to appropriate goal-setting and maintaining positive partnerships will be discussed. Practical suggestions for developing the communication skills that are so critical to positive parent-school partnerships will be provided.

For those who would like to learn more about establishing positive relationships with parents/professionals, and developing and implementing successful educational programs for students with low-incidence handicapping conditions, this presentation will be of great interest.

Helen Kemp Gay, Ph.D.
Special Education Department
East Carolina University
Greenville, N. C. 27834

THE SPECIAL EDUCATION TEACHER AND THE SPEECH-LANGUAGE PATHOLOGIST -- A NATURAL TEAM IN A RURAL SETTING

The exceptional child often has receptive and/or expressive language problems that require the services of the speech-language pathologist (SL pathologist) in addition to the services of the special education (SE teacher), who deals with discrepancies in academic subjects. (SE teacher, for the purpose of this paper, refers to a teacher who serves any area of exceptionality for the handicapped in a self-contained, resource, consultative or itinerant position).

These individuals are in a prime position to work together in delivering the necessary services for the student and to provide a vehicle for carry-over both to the child's regular class and home environment. This is particularly true in rural settings where there is a sparsity of opportunities such as clinics and similar advantages and where distance and transportation is a problem. These circumstances make it critical that everyone work together.

This paper attempts to offer insight into commonalities of the mutual roles and demonstrates how coordination can be accomplished. Once the child's best learning style has been determined, there are several methods and numerous strategies that the professionals can use in their respective roles to strengthen each other's efforts.

Introduction - A close alliance is possible between the SL pathologist and the SE teacher when the child served has a problem in which the deficiencies in performance has its roots in the area of language and the child is experiencing difficulty in oral language. What might have been initially recognized as delayed language or an expressive language problem might well present itself later in failure in reading, writing, spelling and other academic areas. While the language problem may be more obvious in language arts, it is also often seen across the content areas and in social situations.

While the coordination of instruction/language therapy is more easily carried out in the language arts curriculum, there are also many possibilities across the content areas and in activities designed for socialization. Many kinds of learning are dependent on language, and the ability to speak in an age-appropriate manner is essential for adequate communication and interaction.

The Special Education Teacher -- Speech Language-Pathologist and Language Arts

Language arts provides the most natural setting for integration between the professionals since it encompasses activities that utilize language -- listening, speaking, reading and writing. The chief interest of the SL pathologist obviously centers around receptive and expressive oral language, while the SE teacher must also be involved in receptive and expressive written language. There are many possibilities for the SL pathologist to share at least minimally with the written language components.

Sharing Evaluation Efforts

Teamwork could offer opportunities in sharing observations of the student and results of formal and informal testing. Each professional has his/her methods of identifying the individual strengths and weaknesses and learning styles of the child. In writing the IEP, these can be discussed and utilized in mutual planning.

Academics

Reading offers one of the most promising areas for mutual interaction. In reviewing the methods of instruction, the following should be considered.
Phonics. In teaching reading, the SE teacher often utilizes the phonics approach to some extent with her students. Emphasis on sound-symbol association, sound discrimination and blending is similar to some extent to the approach used by the SL pathologist in articulation therapy. Coordination could be easily accomplished.
Language Experience Approach (LEA). If the LEA approach is used, either occasionally or entirely by the SE teacher, much that is done originates with a planned experience, written through the child's dictation to become a chart story, which makes it possible for children to see their own words in print. The SL pathologist can also use the LEA, or a modification of it, by writing a story in the child's personal language book. It could provide the basis for work in morphology, semantics and syntax, in addition to being very motivational.
Multisensory Approach. This approach utilizes all sensory modalities, particularly the visual, auditory, kinesthetic and tactile. It is often used in conjunction with the LEA, although it could be used in isolation. The SL pathologist and the SE teacher could capitalize jointly on this approach. This is particularly true with motivating activities such as having the child trace the configuration of a word as he says it, tracing in sand, gesturing in the air, walking on large letters fashioned with masking tape or writing in chocolate pudding.
Linguistic Approach. This scientific approach to reading initially provides structured word patterns in a sentence and utilizes consonant-vowel-consonant (CVC) patterns, presented as whole words. This approach can very easily be utilized by the SL pathologist as he/she endeavors to help students understand the nature of language and its components.
The Sight Approach. The basal reader, the mainstay of the sight approach, is probably the most widely used reading approach in the schools today. The sight approach is also referred to as the "look-say" and the "whole word" approach. It utilizes words made up of the speaking vocabularies of children in their everyday language and is noted for the enjoyment of story content. The SL pathologist and the SE teacher who coordinate efforts with basal reader materials can work to improve all areas of language. It would provide opportunities to develop natural stress and inflection as the child reads. High-interest, low-vocabulary materials are often developed using the sight method and can be utilized by both professionals to assist in motivation. It may be necessary for the SL pathologist to custom-plan the child's materials to a greater extent in this area than is true for the SE teacher.

Developing Auditory Skills

In the area of language arts there are many opportunities to develop auditory skills. Not only can both professionals develop listening skills in connection with gross and fine sounds through structured lessons, but they can also extend periods of attending and expand vocabularies of students through storytelling, puppetry, listening to records and tapes and many other enjoyable activities. These efforts can be coordinated. While only a minimal amount of writing would appear to be appropriate in conjunction with speech-language therapy, there are many possibilities related to listening, speaking and reading.

Content Area Materials

Other content area materials should be studied carefully by both professionals, possibly with the SE teacher offering leadership, to develop a working vocabulary and understanding of concepts related to such areas as mathematics, social studies and science. Language lessons that the SL pathologist offers can reinforce the vocabulary the child is faced with all day, although the pathologist will have to be selective and use care that the student is not overloaded by too many concepts at one time during her brief encounters with the student.

Pragmatic Language

Not to be neglected is the opportunity relative to socialization. Pragmatics, the branch of linguistics dealing with the relations between language and context, is receiving considerable attention. Delay in pragmatics is evident when children do not use functions that are expected for their developmental ages. Both the SL pathologist and the SE teacher are in prime positions to help the child develop skills in the use of language in its social context through role play and structured activities to make them more comfortable in this area of language.

Parental Involvement

Finally, joint communication with parents is invaluable in sharing the plans and the on-going progress of the student through conferences, demonstrations, teacher-developed language books and in gaining insight from parents regarding their child's needs.

Conclusion

In rural settings, special education teachers and support personnel such as the speech-language pathologist should see the critical need to coordinate efforts in the child's behalf, taking advantage of the mutual expertise which they have to make every possible effort to improve the progress of the child who has a language problem as a part of his special needs.

Helen K. Gay, Ph.D.
East Carolina University
Greenville, N. C.

Receptive Language Difficulties
(Understanding Language)

Observable Behavior

- May be slow to respond to directions or questions
- Has poor vocabulary due to difficulty attaching meaning to words
- Has difficulty determining the main idea
- May repeat directions to him/herself until she/he understands
- May understand better with visual aids, gestures or manual expression

Classroom Accommodations

- Use short, simple directions
- Give visual clue or demonstrate directions whenever possible
- Tape resource material in social studies and science using simpler language
- Keep vocabulary notebooks
- Organize a "buddy system"
- Review previous lessons before starting new ones

Remedial Strategies

- Train in listening skills
- Work on vocabulary development
- Write from dictation first before expecting independent writing
- Develop ability to relate story with correct sequence of ideas
- Use crossword puzzles, riddles, etc., for word building, inferential thinking, etc.

Reading Instruction for the Classroom

- Teach words through strongest learning modality
- Begin with language experience approach
- When auditory skills are developed, use analytic phonics or linguistic program

Expressive Language Difficulties

Observable Behavior

- Cannot recall words for use
- Uses definitions instead of words she/he cannot recall
- May use elaborate gesture system and/or sound effects
- Appears nonfluent at times
- May be shy; may seldom talk in class
- May recognize correct sentence structure but may be unable to reproduce sentence patterns
- May have problems writing sentences and stories

Classroom Accommodations

- Allow sufficient time for oral responses
- Do not put the child "on the spot" but encourage sharing, story telling, etc.
- Help child organize material to facilitate recall; use outlines, etc.

Remedial Strategies

- Use picture cards for rapid naming drill
- Develop verbal expression
- Provide specific practice in sentence formulation
- Tape written work first, then transcribe
- Emphasize tense forms in verbs
- Use sentence completion exercises
- Use exercises in rearranging words in scrambled sentences
- Read aloud frequently to the child

Reading Instruction for the Classroom

- Teach decoding according to strongest input modality
- Use language experience charts
- Work on written language with vocabulary, sentences, etc.
- Use vivid and action-packed stories and pictures for stimulation and verbal expression

The Currituck Model

A Secondary Program for Handicapped and Disadvantaged Students

By Marcia Davies

Currituck County Schools

February 1, 1987

Marcia Davies
Currituck County High School
Barco, North Carolina 27917

Introduction

Teaching the handicapped or disadvantaged student is always a difficult, but rewarding, task. Teachers must go beyond the bounds of stressing academic skills and focus on the student as a total person--a person who needs to be taught to become an adequate, self-sufficient member of society.

In planning this program, we analyzed problems that exist within our rural community. We have no mass transit to get a student to and from a job, nor do we have industry which would provide entry level opportunities. These students need work, but they often lack both the rudimentary skills and a driver's license. They also lack academic, vocational, and social skills which potential employers would require.

We planned our program around the concept of using the existing school environment, through on-campus work experiences and hands-on classroom activities, to provide the academic, vocational, and socialization skills that will help the students realize their potential and become independent, productive citizens. Each student has learned intangible skills, such as dependability, punctuality, positive group interaction, positive attitudes toward work, as well as vocational skills which they have made into tangible, marketable skills.

Target Group

This program serves exceptional students who are:

- emotionally handicapped
- educationally mentally handicapped
- learning disabled
- environmentally disadvantaged
- economically disadvantaged
- culturally disadvantaged

Most of these students come from disadvantaged environments and have little or no parental support. Their personal needs equal their academic needs. As a result, the students have a poor concept of self. They lack social, vocational, and academic skills needed to encourage them to become a part of the total school community.

Objectives

At Currituck County High School, the primary objective has been to teach the total child. To do this, we:

- mainstream students in any discipline in which they can perform successfully both academically and socially

- relate academic skills to job skills
- reinforce academic skills with hands-on experiences to:
  - a. develop vocational competency
  - b. train for occupational placement and job retention
- provide work experiences as a means to:
  - a. improve self-concept
  - b. learn vocational skills
  - c. provide money for personal needs
  - d. develop positive attitudes toward work
  - e. understand the contribution of work in our social structure
- integrate classroom experiences, work experiences, club activities, and responsibilities to:
  - a. improve self-concept
  - b. give students an opportunity to be an active part of the student body
  - c. motivate students to assume responsibilities
  - d. provide a practical environment in which students need to use social skills
- help students get a driver's license
- integrate school and community services
  - a. agencies for employment
    1. Watermark (craft co-op)
    2. Employment Security Commission
    3. Vocational Rehabilitation
  - b. Social Services
    1. Lion's Club (glasses)
    2. verify incomes for program qualification and services (lunch program, work study)
    3. health department (physicals and information on social diseases, birth control, etc.)
    4. churches (especially at Christmas)

Model Services

By the time handicapped or disadvantaged students reach high school, they have often acquired few skills, numerous disappointments, and a defeatist attitude. Many of them are unwilling to risk other failures. With this in mind, we selected models in the following areas:

- Work Experience I, hands-on activities
- Work Experience II, students are paid for services they render
- Job Skills
- Home Living Skills
- Academic Skills

The projects in both Work Experience I and II depend upon the expertise and creativity of the teacher and the resource people he/she can bring into the classroom. In our case, the teacher is a master in basketry, woodworking, and crafts. Her expertise and energy are contagious; her concern for each child genuine. More specifically, the models are as follows:

Work Experience I—Hands-On Experience. Each student completes a project at his/her level and interest. It may be weaving a basket, caning a chair or a stool, or refinishing a piece of furniture. The student may use the skill as a recreational skill or as a potential employment skill.

The finished products are sold to individuals or to local craft outlets. Revenue from the sales gives the student a sense of accomplishment; often a sense of amazement; and always a positive self-concept.

In order to pay the students for a well done job, the money from the sales of their products goes into their club, ESVA (Exceptional Student's Vocational Association). This money is used throughout the year for civic and social activities that involve the students. They have contributed to the Statue of Liberty restoration and donated to families in the community who have experienced hardships such as fire and death. In addition, they have gone to Busch Gardens and had picnics at the beach. The highlight of the year was our trip to High Point, North Carolina, to tour the furniture industry. Here, the students realized the skills they had learned in the classroom could be applied to job skills required by the furniture industry.

Work Experience II—Paid Services. For this phase, we needed an environment in which the students could learn vocational skills while they worked in an apprenticeship position. We found many of the skills we wanted to include could be provided in the school environment. As a result the cafeteria has become our primary laboratory for learning a variety of skills. Here, students work the dishwasher, set up a salad bar, cook, wrap sandwiches, clean the kitchen and dining areas, empty trash, make ice cream, and even assume the responsibility of running the stock room. To receive wages for their labors, students must perform the job in a satisfactory manner.

Members of the cafeteria staff are aware of each student's disabilities, yet they supervise in a manner that helps the students develop satisfactory standards of work skills. The students are encouraged to work to their potential. This system helps the students develop a positive self-concept. In fact, we have transformed students who had virtually no job skills into young men/women who can face prospective employers and proudly state, "Yes, I have work experience."

Since tourism is one of our biggest industries, it is conceivable that many of these students are learning skills they will use when they finish high school.

The students spend their "salaries" on items such as shoes, clothes, and personal hygienic items as well as items needed by other members of their families. They also learn how to spend money wisely. One student realized he was wasting money. To stop this, he opened a savings account. Now, he enjoys telling the other class members how much money he has in his account.

Being able to pay these students for the services they render is an important key to the success of our program and should be a part of the budget for the program.

Occupational Skills. In the classroom, we discuss job skills, job applications, and interpersonal relationships. We also simulate job interviews and tell the students about agencies and other resources outside the school environment.

Resource personnel are used as the link between the school environment and actual work sites. For example, Vocational Rehabilitation personnel visit the classroom and discuss their services with the students. This experience helps students make the transition from the school environment to the job market. Our Superintendent has talked with the students about interviewing techniques and conducted simulated interviews with several of the students. Personnel from the Employment Security Commission have discussed the services provided by their agency. Representatives from Health and Social Services explain how to get a work permit as well as other services offered by these agencies.

These resource people help to make complex, frustrating situations very concrete and bring them within the grasp of the students.

Home Living Skills. For a student to function on a day-to-day basis, he/she must be able to develop skills for self-maintenance, self-management, and home management.

To increase the student's awareness of the "real world," we go on field trips to banks, grocery stores, and department stores. Students perform tasks in each of these areas. For example, each student who went to the grocery story had a list of items to purchase. From this project, they:

- practiced comparative shopping
- used reading skills to read labels
- learned the layout of the grocery store
- budgeted their time and their money

In this unit, the students also discovered applesauce and pumpkin for pies don't come out of cans! They also found that pretzels are easy to make as well as nutritious. They came to realize a complete meal does not have to be a major endeavor.

As the final step to this project, the students prepared a meal from the items they had purchased from the grocery store. Needless to say, each student was proud of his/her contribution to the meal. In addition to the obvious skills acquired by the students, they also:

- improved their organizational skills
- developed strategies for staying on task
- cleaned up the work area
- budgeted time wisely
- tasted new foods

Furthermore, they practiced:

- good eating habits
- kitchen safety

- good hygiene
- proper table manners
- proper table setting

Academics. Academics for our exceptional student has been geared around two major areas: the State Competency Test and real life skills.

Passing the State Competency Test is a requirement for a certified diploma. Passing this test gives these students the added confidence they need to seek a job which they must have to pay their bills and to become self-sufficient.

The sciences are a terrific vehicle for teaching basics such as how to read a thermometer and discussing the difference between a normal and an abnormal temperature. Discussing pollution of the environment teaches the students to recognize pollution, and understand the problems it causes. The students realize they are an integral part of the environment and responsible, therefore, for maintaining healthy conditions.

Teaching first-aid provides an opportunity to discuss safety on the job and in the home. We also discuss how to prevent accidents and how to cope when an accident does occur.

Effectiveness of the Program

To best evaluate the effectiveness of this program, a person needs to visit the site, see the projects made in the hands-on experiences, and talk with students who have been in the program. Other students and staff members can share insights from having observed the program in action. The intangible benefits are often as important as the tangible benefits, yet, it is the intangible benefits that are often difficult to measure. Our successes and our failures make this point.

Success is when a student improves his appearance because he has money to do so; failure is when a student drops out of school or when a student has been suspended from the work study program. Success is when you see a student have enough self-confidence to go out on his own and acquire a job, or when a student tells you he/she correctly set the table at home. Success is when a student comments that she/he watched Roy Underhill on television because he does the same kinds of things we do in class. Success is having a group of students from different backgrounds and cultures interact both in and out of the classroom. One of the greatest successes is when you realize the students have replaced "I can't" with "I did!" or "I can!"

One way we turn even our failures into successes is by notifying Vocational Rehabilitation when we have a student who drops out of school. Since this agency has already established the groundwork, it is often able to help the student find a job. Students who are suspended from the work study often grow from the experience. As a result, they often return to the program.

The tangible effectiveness has been achieved through the support of:

- the school staff
- community resource people
- central office staff

Because of staff enthusiasm, we have been able to work together to keep the program cost efficient and effective. Our carpentry teacher has donated time and materials. Working as a team, we have been able to guide the students as they have turned scrap lumber into sellable rush-bottom footstools. Local business persons have interviewed students. The local merchants have lectured on how to become a comparative shopper. Our Superintendent has worked to be sure the program is funded from year to year.

Our program is a success because people have cared enough to pull in the same direction and work towards the same goals. In the end, everyone benefits.

Cordelia Robinson
Barbara Jackson
Meyer Children's Rehabilitation Inst.
Omaha, NE 68131

ABSTRACT

Identification, Referral, and Brief Intervention Strategies with Chronically Ill and/or Handicapped Infants and Toddlers

As early intervention efforts have increased in availability, populations of children not previously identified for services are being identified and served. One such population of children are infants and toddlers who, due to chronic illnesses, are experiencing extended hospital stays. Within a year period, 198 such children were referred from two hospitals; 72 percent of those referred were ultimately verified as handicapped and referred for school services. Staff in the Early Referral and Follow-up Project, an HCEEP funded demonstration project, worked with such hospitalized children and their families and also with the primary care nursing staffs in hospital settings, community settings, and with school district personnel.

The principle aims of this program are the development and validation of a model designed to expedite identification of handicapped children (0-3 years) in acute care settings and facilitate referral to and initiation of services by these infants' local school districts. This required,in many circumstances, establishing networks with rural resources. The second principle aim was the development of a program designed to assist parents of hospitalized infants in several specific tasks including: 1) learning specialized medical/nursing care and developmental intervention techniques while their child is hospitalized; 2) adjusting to the presence of a handicapped child in their family; and 3) contacting their local school district for educational services for their children who qualify for such services under state regulations.

Several phases of the model project and issues encountered in serving this population will be presented by members of the project staff. Major topics to be covered include:

1. Characteristics of hospital-Identified Population. The prevalent diagnosis, manangement needs and developmental characteristics of the identified population will be reviewed.

2. Case Coordination. Provides information about the coordination process used when referring children to local school districts if they meet infant preschool handicapped eligibility criteria. Issues addressed include identification, assessment referral and family support.

3. Educational and Therapy Intervention Strategies with the Chronically Ill Child. Stragegies for incorporating educational and therapy recommendtions into daily in-hospital and home-care routines will be presented. Role issues encountered by education and therapy staff in the hospital setting will be considered. Strategies for providing parents with instruction regarding developmentally appropriate activiites will be discussed.

4. Integration of Educational Intervention into a Hospital Setting. Work with this population of chronically ill, very young children is becoming a more typical role for educators and developmental therapists. Issues involved in serving in the hospital setting will be discussed.

Co-Presenter Barbara Jackson, M.S.

Position/Title Coordinator of Infant Program

Institution Meyer Children's Rehabilitation Institute

Address 444 South 44th Street

Omaha, Nebraska 68131

Telephone: Bus: (402) 559-5765 Home: (402)331-6307

SpecialNet Code (if any): NEMCRI/NEBRASKA

Rural Options in Gifted Education:
An Examination of Alternatives

Kay Sather Bull - Oklahoma State University

ABSTRACT

Different types of rural programs are examined. The author concludes that programs which focus on urban values and large number groupings are inappropriate for rural settings. Rural programs should be those which involve the community and recognize its values. Using this as a vantage point a set of generic techniques, applicable to all settings, is developed which relate to the development of classroom environments, curricular procedures and cooperative educational practices. Grouping provisions are examined in the light of traditional cascade model approaches and are found wanting. Alternatives for rural groupings are examined through the use of technological mechanisms. Modifications in curricular provisions are examined in terms of changes in (1) rate of progress, e.g., using out of level texts, (2) control of content, e.g., independent study and (3) additional nontraditional course offerings which can be used in rural settings, e.g., Olympics of the Mind. A variety of technological options are examined which are categorized according to (1) ways to access people, e.g., telephone conference procedures, (2) ways to access instructional content, e.g., using National Public Radio programs to provide content for discussion with mentors. Options which involve transportation are also presented, transportation of teachers e.g., in cooperative networks and of students for special events which do not detract from the "ruralness" of the program. Finally options which are traditionally provided outside of school time will be examined, e.g., summer & Saturday programs. Examples for all of these options will be drawn from the recent literature in rural gifted education and will, where possible, provide examples from successful rural programs.

Dr. P.G. Silver
Chairperson, Special Education
HS-ABS Division
School of Education
University of Massachusetts
Amherst, MA 01003

Craig Jurgensen
Special Education
HS-ABS Division
School of Education
University of Massachusetts
Amherst, MA 01003

A Collaborative Project for the Inservice Training of Special Education Teacher's Aides in a Rural Setting

Introduction

Sher (1978) reports that more than 11,000 school districts -- two-thirds of the U.S. total -- are in nonmetropolitan areas. Meeting the educational requirements of special needs students in rural settings presents many problems and accentuates many differences between the special education service delivery of rural districts and their metropolitan counterparts. These differences are reflected in the percentages of the school population served, personnel turnover and availability, transportation, community structure and attitudes, geography, testing and placement backlogs, communication dynamics, composition of student population, population density, interagency cooperation, and the roles of specialists (Marrs, 1984). Although Marrs perceives a "rural special education bandwagon" gathering momentum within the teacher education programs of some colleges and universities, the fact that problems persist is not surprising.

Rural Special Education

The distinct nature of rural school settings poses numerous problems for the effective delivery of special education services. Major problems include funding inadequacies, transportation difficulties, inadequate provision of services to low-incidence special needs populations (Helge, 1984b) and difficulty in recruiting and retaining qualified staff (Helge, 1981). Helge (1981) also reports that the the Offices of Rural and Human Development have determined that the cost of providing special education services, particularly to low-incidence special needs children, is higher in rural than in urban areas. Sher (1978) states that teachers are not trained to meet the "unique challenges" of rural school teaching due, in part, to the federal government's lack of responsiveness to the specific issues of rural education.

The issues which differentiate rural special education service delivery from urban special education service delivery vary more in quality than quantity. That is, both experience difficulties with meeting the needs of their special education students but the nature of the difficulties varies. For example, personnel turnover occurs within the structure of both systems. Rural school districts, however, generally lose their specialized "on-line" personnel whereas turnover in urban districts more frequently involves administrative personnel. Another problem involves students waiting for assessment and placement. Rural school districts experience this problem due to a lack of personnel, whereas in urban districts, the problem is largely due to bureaucratic and organizational barriers (Helge, 1984b).

Sher (1978) states that "rural areas have the nation's highest rates of malnutrition, infant mortality" (p. 280) and that "no matter what standardized testing systems or assessment programs are employed, researchers have found that rural children rank lower than their metropolitan counterparts" (p. 281). The limited acceptance and negative attitudes toward handicappped students by members of rural communities is an issue raised by Tunick, Platt, and Bowen (1980). They state that if a community's attitude toward handicapped individuals is one of non-acceptance (as the results of their investigation indicate is more likely in rural communities) it may have a negative affect on program quality and availability. Helge (1981) and Marrs (1984) support this notion and state that the integration of institutionalized students into rural communities raises issues of both attitude and service provision. The challenge to meet the needs of these students is a concern to both school boards and administrators, as well as the student's parents themselves who may have "grown comfortable with the idea of placement outside the home" (Helge, 1981, p. 519). Clearly, these problems, issues, and challenges highlight the need for innovation and improvement in the delivery of educational services to special needs children in rural school districts.

Teacher's Aides in Special Education

The role of special education teacher's aides has changed and expanded from one of freeing the teacher from non-instructional, clerical and housekeeping, duties to one of greater instructional participation (Boomer, 1982). Helge (1984a) notes that "trained paraprofessionals are frequently used by rural school districts when certified personnel are unavailable." (p. 324) Frequently referred to by such various titles as volunteers, para-professionals, teachers helpers, sub-professionals (Shank & McElroy, 1970), teacher assistants (Howe, 1972), and "the other teacher" (Gattman & Hendricks, 1973), teacher's aides have largely been accepted as part of an "instructional team" made up of the aide(s) and the teacher (Boomer, 1982; Howe, 1972). Howe (1972) considers them a "natural extension of the teacher" (p.1), and they are "valuable allies" (McKenzie & Houk, 1986) in the education of special needs children as is evidenced by the significant increase in their employment (Frith & Lindsey, 1982). Public Law 94-142, The Education for All

Handicapped Children Act of 1975, and section 504 of the 1978 Amendments to the 1973 Vocational Rehabilitation Act are largely responsible for many of the changes in the role of the special education teacher's aide (Frith & Lindsey, 1982; Fafard, El-Mohammed, and Gartner, 1977). P.L. 94-142 with its mandate of a "free and appropriate education in the least restrictive environment" underscored the importance of the paraprofessional's role in special education. Frith and Lindsey (1982) report that in addition to the legislative mandates, investigations into the growth of paraprofessionals in special education point to several other factors:

1. The previous successes experienced by paraprofessionals working with various special needs populations;
2. The paraprofessionals ability to work across educational settings;
3. The previous successes of paraprofessionals in other professional settings;
4. The relative low cost and availability of personnel to fill the role of special education paraprofessional -- particularly in _rural_ areas.

The special education paraprofessional has acquired an array of new responsibilities including academic, psychomotor, and social skills tutoring. Paraprofessionals are used to "conduct follow-through exercises assigned by a speech, physical, or occupational therapist or assist with adaptive physical education exercises." (Helge, 1984b, p. 324) Kirk and Gallagher (1986), in discussing the provision of educational services to students with behavior problems, note the necessity of utilizing trained paraprofessionals since there are inadequate numbers of professional personnel to meet current needs. The placement of special needs children in local school district programs, their integration into mainstream classrooms, the legal and ethical necessity of implementing Individualized Education Program (IEP) goals, and the provision of mandated services have also hastened the paraprofessional's movement from non-instructional to direct service duties.

A well trained paraprofessional can provide the necessary support and resource required by school district specialists to organize and coordinate a child's instructional program and, in short, implement each child's IEP (Boomer, 1982). Of course, teacher's aides cannot singlehandedly solve the problems of rural special education. Inspite of the advantages of utilizing special education teacher's aides and the positive value attributed to their roles in providing special education services, there is an issue that poses a barrier to their effectiveness: the need for, and lack of, adequate training (Fafard et.al, 1977; Frith & Lindsey, 1982; Helge, 1984a). Helge (1984a) states that "appropriate training and careful observation of performance" (p. 324) are critical to the succesful utilization of special education paraprofessionals. Frith and Lindsey (1982) note that the problem of "inadequate formal training as to the needs of children" (p.234) by special education aides is second only to their improper useage by supervising teachers. Disparities between a paraprofessional's skills and abilities and the demands of job placement are cited by McKenzie and Houk (1986) as possible sources of interpersonal conflict and reduced job effectiveness in special education settings. Recognizing these deficiencies and the importance of paraprofessionals to special education motivated the present collaborative effort to provide special education teacher's aides with an effective inservice training program.

Accepting the Challenge

The "Accepting the Challenge Training Modules" are designed to train instructional aides who work with special needs children and youth. The primary goal of these multimedia training modules is to provide aides with the necessary entry level skills in all developmental areas. A central theme in all of the modules is the aide's role as an active participant in the special needs students' learning and development. Under ideal conditions, a special needs aide can be a:

1. Facilitator, communicator;
2. Role model, interactor;
3. Observer, listener, instructor, materials developer;
4. Leader, task analyst, diagnostician, authority figure, and challenger.

The Accepting the Challenge Multimedia Training Series was developed by members of the special education staff of Central Berkshire Regional School District in collaboration with outside consultants. Funding for the project was provided by a Massachusetts Office of Education Technical Assistance Grant. The training materials were field-tested in the Central Berkshire Regional School District.

Contents

The program consists of five modules in all developmental areas. (1) Module One: Social - Emotional; (2) Module Two: Normal and Abnormal Gross Motor Development; (3) Module Three: Normal and Abnormal Fine Motor and Perceptual - Motor Development; (4) Module Four: Communication; and (5) Module Five: Basic Skills and Cognitive Development. Upon completion of the training, the participants are able to identify:

1. The critical skills and attitudes for facilitating growth of a student's self-confidence and independence; positive behavior management techniques; and, positive adult-child and peer interactions (Module One).
2. The normal developmental sequences for gross and fine motor skills (Modules Two and Three).
3. Atypical gross and fine motor development (Modules Two and Three).

4. Adaptive equipment for students with atypical motor development (Modules Two and Three).
5. Intervention strategies for students with atypical motor development (Modules Two and Three).
6. Language and communication needs (Module Four).
7. Basic communication principles (Module Five).
8. Instructional strategies, e.g. task analysis (Module Five).

The modules allow special education service systems maximum flexibility in adapting the materials to meet their training needs for special education aides and other entry level staff. The modules can be presented separately or in combination with each other.

The training materials represent approximately 10 hours of introductory level training. Each training module is "self-contained" and includes: (1) an introduction with stated purpose and objectives, (2) handouts with suggestions for use, (3) instructions for use of the videotape and accompanying discussion questions, (4) a 1/2 inch 90 minute videotape, (5) a training needs assessment survey, and (6) suggestions for use of the module. In addition, the entire training program was designed to conform to the individual and group instructional patterns of adult learners as suggested by Dellefield (1978):

1. Adults engaged in continuous learning need individual instruction some of the time;
2. Individual follow-up of group discussion may assist the adult learner;
3. Individual learning should be a cooperative venture with the instructors;
4. Getting together in small groups is a characteristic of adults;
5. Small group instruction should be the standard practice in adult education;
6. The adult learner expects immediate outcomes from small group instruction;
7. Adults "grow" with the expectation of participation in small groups;
8. Learner participation is a key to small group instruction;
9. Lectures are not the only effective method of teaching adults in small groups;
10. The person in charge of a small group must be a patient listener.

A brief overview of each Accepting the Challenge modules follows to provide the reader with a more detailed picture of the training program.

Module One - Social and Emotional Development.

The purpose of this module is to present aides and other entry level professionals with an overview of some major concepts for the facilitation of social and emotional development, self-confidence, and behavior and classroom management. Topics addressed in this module are: (1) the role of the aide vis-a-vis social and emotional development; (2) strategies and specific techniques for positive behavior management; (3) attitudes for positive interactions; (4) suggestions for improving personal adult-child interactions; (5) use of reinforcement to change behavior; (6) elements of a healthy learning environment, and (7) techniques for facilitating independence and self-confidence. The suggested breakdown for the presentation of the training materials is as follows:

Topic	Minutes	Format
Important factors for social-emotional development/overall goal for social-emotional development of the child.	10	Lecture/ handouts
The Role of the Aide	30	Interactive activity/handout
A. The role of the in the process of helping to encourage learning and healthy socio-emotional development of the child.		
B. Limitations of the aides role.	10	Lecture/handouts
C. Summary of the aides role.	15	Lecture/review/ handouts
Frustrations of the job in relation to behavior management	15	Discussion
Rewards of the job	10	Discussion
Reinforcement strategies and goals for creating a healthy socio-emotional environment.	10	Lecture/handouts
Discipline	30	Question & Answer

Module Two - Gross Motor Development and Intervention.

Topics addressed in this module are: (1) normal motor development; (2) terminology used in physical therapy; (3) abnormal gross motor development in specific syndromes (e.g. cerebral palsy); (4) positioning, including adaptive equipment, and (5) transferring.

Topic	Minutes	Format
Normal motor development	12	Lecture/handouts
Terminology	2	Lecture

Topic	Minutes	Format
Abnormal motor development causes and characteristics of: Cerebral palsy, muscular dystrophy, Down's Syndrome, developmental delays, range of motion, and gait.	30	Lecture/video of children/ handouts
Positioning adaptive equipment, positioning techniques/problems, safety of children and staff	15	Lecture/video of children
Transferring/adaptive equipment	15	Lecture/video of children/ equipment

Module Three - Fine Motor Development and Intervention.

Module Three addresses the topics of (1) definition and functions of occupational therapy; (2) aspects and progression of normal perceptual and fine motor development; (3) atypical fine motor development; (4) strategies of physical and verbal assistance for fine motor intervention; (5) normal and atypical grasp with intervention strategies; and (6) positioning techniques for fine motor development.

Topic	Minutes	Format
Definitions and terminology related to OT	5	Lecture
Normal fine motor development	15	Lecture/handouts
Atypical development and characteristics	10	Lecture
Physical and verbal assistance for intervention	10	Lecture
Normal and atypical grasp, coordination of fine motor movements including grasp, crossing the mid-line and fine motor intervention strategies	45	Lecture/video of children, handouts, and "props"
Positioning for fine motor tasks	15	Lecture/video of children

Module Four - Communication and Language Intervention.

Topic	Minutes	Format
Receptive and expressive language problems.	15	Lecture
Activity One: Following Directions		Activity
Speech Skills Activity Two: Expressive Interpretation Activity Three	25	Discussion/ lecture
Speech Interpretation	5	Individual activity
Causes of communication problems: overview	15	Lecture
Intervention for communication problems: An introduction (cueing into non-verbal communication & different ways to communicate)	15	Lecture
Activity Four: Exercise for an alternative to verbal communication	15	Small group activity & discussion
Communication: What is & what isn't communication Activity Five: Communication - process & product	15	Lecture/small group activity
Verbal & non-verbal communication Activity Six: Attitudes, feelings and interactions	25	Lecture/small group activity
What is communication? A summary.	10	Large group activity.

Module Five - Instructional Strategies.

Topics addressed in this module are: (1) types of learning styles; (2) the Individual Educational Plan; (3) strategies for group cooperation; (4) specific instructional strategies; and (5) instructional task analysis.

Topic	Minutes	Format
Learning styles	10	Lecture/handouts
Individual Education Plan	10	Lecture/handouts
Types of instruction & materials	15	Lecture

Topic	Minutes	Format
Classroom activities	25	Lecture/video tapes of children
Instructional task analysis - definition, steps & types	10	Lecture/handouts
Task analysis of academic & physical activities	30	Lecture/video tapes/handouts

Conclusion

The Accepting the Challenge Training Modules are designed to be used by specialists who want to train their aides to be active participants in the learning and developmental process for special needs children and youth. The modules can be used for individual and small group training sessions. The Needs Assessment Survey can be administered to determine the trainee's entry level prior to use of the module. Trainees with similar needs can be grouped for small group instruction.

The modules can be used individually or in combination (e.g. Communication and Social-Emotional). Moreover, specific sections of each module can be used (e.g. adaptive equipment in Module Two) rather than using the entire module. Additional suggestions for use of the training program include:

1. Training of parents in the areas of communication and motor development;
2. Training of classroom teachers (e.g. use of Module One: Social-Emotional Development);
3. Individual review of video tapes and application of the skills in supervised settings;
4. Addition of reading or other supplemental materials to meet particular school and district needs;
5. Transportation of materials to different school building locations without requiring teachers, aides, and parents to travel unnecessary distances.

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CONCURRENT SESSIONS

THURSDAY, MARCH 19, 1987

4:00 - 5:00 PM

John Beard
Project Coordinator
Project SCOPE
Humboldt School Dist.
P.O. Drawer A
Dewey, Arizona 86327

Project SCORE

SUPERVISED CAREER OPPORTUNITIES IN A RURAL ENVIRONMENT

The purpose of Project SCORE (Supervised Career Opportunities in a Rural Environment) is to develop, implement, evaluate, and refine a cooperative transition model which focuses on the transitional needs of junior high and senior high special education students in a rural school district, Humboldt Unified School District, Dewey, AZ. Support for this Federally funded grant is based on national trends and priorities, state level needs, and local community needs for the development of individual transition plans specific to the needs of rural handicapped youth. This model will provide handicapped youth with the skills necessary to access post-secondary options/employment within their rural communities through the presentation of functional school-based curriculum and work experience components. This model will also provide needed collaboration among adult service providers, the school district, and local business/industry through the formation of a Rural Interagency Council (RIC). The purpose of the RIC will be to establish linkages between educational services and adult service agencies, which result in effective coordination of transition for junior high and secondary level handicapped youth within the rural district.

This presentation will focus on the working development and implementation of the objectives listed below, with particular attention being directed towards objectives 1, 2, and 3. Overall development and implementation of this grant will be discussed, as well. Methods for obtaining similar funding will be covered, as well as this model's effectiveness and impact, to date, on the students served.

The objectives of Project SCORE are as follows:

1. Develop and infuse a functional school-based vocational curriculum and training component within existing curriculum for special education students at the junior and senior high level, consisting of an instructional core that combines basic academic skill training with pre-employment and work maturity skills attainment.

2. Develop and implement a supervised work experience component, wherein handicapped youth work in the private sector, supervised by project staff knowledgeable in effective, consistent training techniques, principles of task analysis and reinforcement.

3. Establish a Rural Interangency Council (RIC) designed to develop and implement a collaborative interagency service delivery system within the target area, in order to access post-secondary training and employment opportunities to handicapped youth and provide a smooth transition from school to community life.

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4. Disseminate project findings and advertise availability of project products via professional journals and workshop presentations to secondary program special/vocational educators and administrators, habilitation and rehabilitation programs, private business and industry.

5. Establish at least one replication site in an Arizona rural district.

Prepared by: Sandra Stuart Siddall
California State University Chico

How To Successfully Approach Your Legislator for Financial or Political Support

In order to gain support from your legislator, you need to know the practical approaches to use with them. There is a protocol to be followed, as well as other techniques that one can use to be better received. This paper is written with the intention of helping those who have an issue to bring before their legislative representive, to be more prepared, and therefore, potentially more successful.

One of the basic problems that Americans have, is their lack of sophistication in the area of politics. Many citizens do not know the difference between a federal congressional representative, versus their state's legislative representative. The states all have assembly and senate districts. The assemblyman represents a smaller population segment of the state, whereas the senator will have a larger population to represent. The congressman of the state is not associated with the state-level politics. The state legislatures will meet in their respective capitol cities during session, the Congressmen meets in Washington D.C. for their congressional sessions. A state issue should go before the Assemblyman or Senator, a Federal issue/National issue needs to be directed to the Congressman. Therefore it is initially important to understand the structure of the government, in order to know where to seek the appropriate aid. A common cource of phone calls and letters in the state legislator's office recently, was to complain about the congressional pay raises. This is an inappropriate subject to take to the state assembly or senate. They have no say in this issue. Contrary to popular belief, a politician is just like any other politician. Our government is set up on very definate structure...local, state and federal.

For those people who at least have knowledge reletive to which political representative is the correct party to contact, the next thing to be aware of is that representatives basic level of knowledge. There is a generalized feeling that the political representative should know everything about everything. It has to be clear to the person who wants access to the politician, that only the people of the industry or issue being focused on are the experts on the matter. In California last year,over 5,000 bills were introduced. How can one political figure be familiar with all the consequences of all the actions that each bill is written about? The legislators rely heavily on their constituents that are the experts of each issue, to provide input to their office about that bill, or any issue that arises. At best, your representative can only be a generalist. Your testimony on a topic is where he/she will gather their ammunition, in order to go to battle over an issue. If the constituents don't care enough about the bills that arise, or the potential problems that creep into a lesgislative year, to not give information to the politician that will be useful to him/her in casting a vote, then the legislature will make a decision without the needed input.

The way a legislator will collect information if his/her constituents fail to provide the necessary input, is as follows. The legislator will read the local papers from each of his/her towns; listen to the local news broadcasts, get his/her aides out into the communities to hold meetings with social and professional organizations; and go out into the field himself/herself. There are a certain number of walk-ins and telephone calls to each representative's office each day. In Assesmblyman Statham's Redding office, his aide categorized one months worth of calls into the following data:

11 calls for Mr. Statham or his aides to speak
17 calls for a status report on a bill
52 calls from people who needed help in dealing with a state agency
19 calls that were directed to the local Board of Supervisors
15 calls for state tax information
18 miscellaneous/personal

Out of these 132 calls, 11 were specific to education issues.

It is important for people to understand, that very little information or requests go directly to a legislator. Everything is virtually screened by the politician's aides and staff. A legislator simply can't handle individual needs of his constituents.

In order to gain access to your assemblyman or senator,you must first identify your problem. Once you identify your problem, figure out who in the government has the say in this issue. Then you need to go to the closest agency, that serves the smallest number of constituents. The smaller the number of people this agency services, the more familiar they will be to the issues of that local area, and the needs of the people they are serving. Redirecting people and their efforts is a big role of many political offices. It is hard on the people, because they have to start all over again, duplicating steps they took to get to the original politician. It is hard on the legislator because people come into the office so hopeful, and leave so angry or disillusioned if they are re-directed. There also seems to be a myth among people that if they go to their legislator, he or she can just pick up a phone and enforce some bureaucratic magic. The only magic a legislator has is he or she has a better"phone book" then the non-official person. Legislators know who to call. And certainly, a call from one legislator's office to anothers, in reality can be more efficent or effective, then a phone call from an individual. It may seem amusing, but an agency has to remember when their local assemblyman or senator calls for some assistance or information, that the same politician will be voting on that agencies budget during the legislative session.

People who have prepared to meet with the legislator or one of his/her aides, do make the politicians job easier. In order to prepare,and subsequently present, one needs to answer certain questions about their problem. One has to exactly define what the problem is. Who have you contacted about this problem. What happened with each contact...what was said or done. Do you have any documents supporting your statements. What is it that you seek? Are there costs or a budget involved? What will it take exactly to accomplish what you want done?

Who can do the work? Who are the experts in this field; either to do the work or to use as resources. With this information, your legislator can get to work, for you. People come into their legislator's offices all to frequently without a clear definition of the problem, nor what it is exactly that they want from the legislator. If you the constituent can't identify the problem, who will? If you rely on experts for information, and if the experts don't have that information, that means that your politician will be without information.

It is important to put things into written form. Your political representative needs written work, as his/her reference point. You can't get much done about a bill or an issue, just over the phone. People need to list names and addresses and phone numbers, and who might the spokesperson be, or what the group's name and focus is.

It was interesting to me to find out that when people are asked to address the above mentioned categories of information in letter or written, a significant number of people are never heard from again. It is speculated that when people are forced to do their homework and put thoughts into writing, they discover a solution to their own problem. As well, the thought process itself more clearly defined the problem for them. Lastly, after doing the homework and writing it down, they may realize it was not worth pursuing, that they got satisfaction simply from investigating the problem. Many phone calls that come into a local politician's office are from people looking for sympathy. Amazing as it may seem,legislators get calls from distraught wives and husbands, and parents who want to know what to do with their children.

Many legislators are in favor of receiving group letters or computerized letters, that say the same thing, but are signed and dated and addressed by individual voters. It is in fact useful for the politician to receive mass mailings. Then he or she can approach the governor of the state or other legislators, and say, " this is the number of people in my district that are concerned about this issue." This kind of mailing is especially helpful for the rural legislators who have to combat the lack of knowledge other politicians from urban areas have, regarding rural problems.

Most legislators get many publications, bulletins and newsletters from agencies within their district. The agencies that rely on a politicians vote will make an effort to keep him/her abreast of their agencies activities and needs. These mailings are screened normally by the politician's aides. Some articles are clipped out, others are summarized. Everything is filtered to the legislator via his/her staff.

All letters, even the mass mailings, are answered. Sometimes the answer is merely an acknowledgment of the letter being received. Not all people will get an answer to their concern immediately. It is important for everyone to understand when taking an issue to the politician, that a bureaucratic answer may not be forthcoming. Many legislators will try to indicate to the person who is making the inquiry, how feasible the solution may be. Most political people will make an attempt to solve all problems brought to their offices. However, somethings the legislator already knows can't be done. The person on the receiving end of that kind of news needs to be realistic about that outcome. However, all efforts and attempts should be tried. How far a person takes it, is dependent on that person's emotional and personal and/or professional committment. Still, one needs to be realistic.

Reletive to time lines and appointments. The everyday, successful salesperson knows that if they can't sell their product in 15 minutes or less, the product won't be sold. Lobbyists take 5-10 minutes to make their respective points. Therefore, plan to set an appointment for 15 minutes. If the politician wants more information after that period of time, it then becomes his/her time, and you are off the hook. Do not go over your allotted time, unless you are invited to stay. Get in and get out, is the best approach. As long as you are educated in the details of the subject you are discussing, you will be listened to. That is not to say that you have to be particularly articulate or have several degrees behind your name. The human element still comes into play in all political arenas. Sometimes very real problems are surfaced by people who are not able to speak fluently, nor are they necessarily sophisticated in their knowledge of the political system. These people still will be heard and represented by the legislator. However, I would chance to say that if any of us present went in ill prepared, it would reflect poorly on us and our agencies/institutions...we have the opportunity to learn how to work most effectively with the political system. Not knowing is a poor excuse.

From year to year, the topic that the politician is most familiar with or currently being bombarded about, is generally a reflection of what is the hot topic being covered in the media. As well, what ever that legislative session is working on will draw many inquiries. Topics that can be exemplified are: toxics, unemployment, education. Generally speaking, in the political circles, taxes, torte reform and toxics are the buzz words of each session. The legislator really wants feedback from all angles and all views. It is up to the voters to provide that data to him/her.

There is going to have to be a total shift on everyone's part in the government and in education, to help finance education. Traditionally, higher education got alot of federal support, and very little state support. Now, the federal support is limited, and still, the state doesn't have any extensive money for higher education. Education will have to show the public what's its worth is. Education is going to have to screen among its own ranks to remove any excessive spending or programs that are ineffective, or people who are disenchanted with their jobs. You can not have teachers going around saying that they live for teach for three things...June, July and August. The state on the other hand is going to have to find funding for viable programs. The Gann initiative makes it clear...if you want to continue program A, the money to support it will have to come from program B. There is no other money available. Even if taxes are raised, we can't spend that money. Of course, this means that internally the competition between programs is going to make for the survival of the fittest. No doubt it will cause conflict and former allies will be now battling for the same funds. The people who are the best organized and who speak as one, will have the higher chance of survival.

If a group wants to secure more support for their area of concern, networking is appropriate in political issues, as well as business issues. All voters should see how their legislator votes, so they will be familiar with his philosophies and sympathies. If your legislator is not sympathetic to your cause, find a legislator who is, and then get your professional colleagues that are in his/her voting district to do the mass mailing or presentation, and petitioning. A voter with information will get more attention, than a person with information.

Your legislator has all he/she can deal with, just representing their own constituents, much less voters from other districts.

It is a good idea to divorce the emotionalism out of an issue, regardless of your investments. People will often in public sessions ask, " How does the Senator or the Assemblyman feel about AB2345?" People need to realize that the number 2345 means that was the 2,345 th bill introduced. Your legislator can not be familiar with all the issues and their outcomes. They are only going to be familiar with the bill if: they serve on a policy committee where it is discussed; that the bill has an effect on their district and their constituents are writing in about it. Finally, not all bills are voted on on the floor, alot are screened out during committee time, so then, the politician will become familiar with the ones that get to the floor to be voted on.

Though you and a task force may have generated the most exciting and important document on an issue, that has ever been written, do not expect the legislator to read the hundreds of pages of that report. It is to your definate advantage to summarize your own report into a 1-2 page letter, and send that in to the legislator.If it captures his interest and attention, he will call you for more information or testimony. The legislative staff can and do read and digest reports for their assemblymen/senators. But, a group will be farther ahead if they do the summary work on their own. Wouldn't you rather the politician read at least your 1-2 page letter, than not get to your document and issue at all?

Lastly, you must be aware of lyour state's financial picture, so that the solution your group is looking for and proposing, fits into the overall budget of the state. Legislators know how to get certain budgets through certain committees, and know when to try to by-pass other committees. They know when to introduce your item as a single line item budget for the state. But before lyou and they do any of this, the reality of your state's economic status has to be considered/

Presenter: Ron Frame
South Dakota
Advocacy Project, Inc.
221 South Central Ave.
Pierre, SD 57501

VOLUNTEER SKILLS DATA SYSTEM

CONFERENCE PAPER PRESENTED AS PART OF THE "SEVENTH ANNUAL NATIONAL
RURAL SPECIAL EDUCATION CONFERENCE", ASHEVILLE, NORTH CAROLINA,
MARCH 17-20, 1987

CONFERENCE PAPER CONTENTS

Presentation Title: Volunteer Skills Data System

Topical Area(s): Community Partnerships, Transition Programs

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Purpose and Objectives

The purpose of the Developmental Disabilities Act of 1984, Public Law 98-527, is to promote independence, productivity, and integration into the community by persons who are developmentally disabled. To assist the developmentally disabled in South Dakota with that purpose the South Dakota Advocacy Project, Inc. implemented a Human Development Services - Coordinated Discretionary Funds Program Grant. The duration of the grant period was August 1, 1984, to December 31, 1985.

The intent of the grant was to develop a statewide Volunteer Skills Data System (VSDS), utilizing a unique configuration of capable community volunteers and, a micro computer system, to assist persons with developmental disabilities in South Dakota become more independent, productive and integrated into the community. Currently the Volunteer Skills Data System is a viable component of the South Dakota Advocacy Project, Inc. encouraging increased normalization opportunities, facilitating practical problem solving, transitioning, and complimenting and supplementing existing professional services, through voluntary citizen participation.

In addition an emphasis of the Volunteer Skills Data is to respond to perceived gaps in the developmental disability service delivery system through utilization of screened and trained community volunteers. It is also designed to expand the personal support systems of persons with developmental disabilities in the urban, rural and Native American reservation areas of South Dakota.

Furthermore, because the Volunteer Skills Data System is statewide and has developed positive community partnerships (see Appendix A&B), client and or student tracking is possible when relocation or change in placement occurs. Also volunteers that would relocate to different communities in South Dakota could be matched in new relationships as volunteer needs are statewide. Depending upon the energy level and interest of the volunteer, nothing precludes continued contact with the previously established relationship.

Rural Focus

South Dakota being primarily rural, sparsely populated and having a large geographic area, creates a dilemma for persons with developmental disabilities and their families. Of particular concern, is learning about appropriate services, accessing those services and being informed about key individuals in their own communities or in other parts of the state that may be available to assist them. According to the Executive Director of the South Dakota Association for Retarded Citizens, in a letter on behalf of the development of the Volunteer Skills Data System, "A major problem faced on a continuing basis by organizations such as the Association for Retarded Citizens is one of accessibility: how supply and demand can come together in the area of fulfilling human needs. All too often an individual or family needing and wanting a program or services, or even a willing volunteer, is unaware that such resources exist, or, how to access those resources."

In the state of South Dakota with a total population of 700,000 people and adequate services sometimes several miles away, utilization of capable community volunteers respond to gaps in the developmental disability delivery system in a variety of ways. Community volunteers can provide personal, individualized assistance, help build self-esteem in the developmentally disabled, avoid conflict of interest, and provide a supplemental source of cost effective manpower for professional services. According to the State Office of Developmental Disabilities there are an estimated 3,288 persons with developmental disabilities in the state. Very often persons with developmental disabilities and their families in South Dakota become isolated from their own communities, even though they may live and work in the midst of it. The Volunteer Skills Data System helps to bridge this moat of isolation.

Approach and Methodology

The Volunteer Skills Data System is an innovative, organized method of bringing together persons with developmental disabilities, requiring assistance in becoming more independent, active, contributing members of their community and capable volunteers in meaningful relationships. The Volunteer Skills Data System has developed a taxonomy of twelve (12) volunteer roles to address needs of personal/emotional support, practical problem solving, family member support, supplemental instruction, advocacy and community participation (see Appendix C). An effective method for recruiting capable volunteers is utilized entitled, Key Individual Recruitment System (KIRS). Essentially, KIRS is a networking approach to identifying key individuals in a given community shown to be active, sensitive to the needs of the handicapped and/or possess specific abilities.

Community volunteers utilized are required to complete an application (see Appendix D), provide the names of three references, other than family (see Appendix E), and indicate up-to-five volunteer roles in which they wish to participate. In addition, they are asked to acknowledge the level of proficiency they possess for each volunteer role selected, keyed to our proficiency taxonomy. Also liability coverage of the volunteer applicant is determined, particularly if they will be providing transportation. Monitoring of volunteer activities is conducted on at least a monthly basis through review of Periodic Volunteer Reports (see Appendix F).

An integral component of the Volunteer Skills Data System is utilization of a micro computer system (see Appendix G). A unique computer software program was designed to consider and retain information regarding volunteer identification data, availability, and up-to-five skill and proficiency levels of the volunteer. A parallel software program was designed for developmentally disabled participants.

Practical Implications for Rural Education

According to the State of South Dakota publication entitled, "Status Report: Special Education in South Dakota for School Year 1985-1986", public school enrollment figures totaled 123,875. The special education enrollment figures totaled 17,406. This count included all categories and ages. South Dakota's special education enrollment represents 14.05% of the total school enrollment.

Children and youth in need of special or prolonged assistance, in particular, those with developmental disabilities very often find themselves in educational settings that require unique configurations and adaptations apart from the mainstream system. In any given school day depending on the nature of their Individualized Education Plan (IEP), they may attend a variety of classroom settings and receive instruction or consultation from several different teachers or therapists, beyond what the mainstream youth will normally experience. In addition, they may require special transportation to receive necessary therapies.

Also acceptance by their mainstream peer group is limited due to the stigma of having a developmental disability, coupled with the myths and stereotypes that continue to prevail. In addition youths with developmental disabilities can become vulnerable to those who would take advantage of their functioning or reasoning ability. Further, recreational, social and group opportunities by the mainstream peer group is limited due to the stigma of being associated with an impaired person.

Families of youths with developmental disabilities are also impacted by their continuing efforts to obtain an appropriate educational program for their impaired son or daughter. They are sometimes overwhelmed by the role they are placed in of deciding the unique educational needs their son or daughter has and factoring that into what the local school district will provide. In addition as their son or daughter draws closer to the completion of their secondary education, families are then faced with decisions about post-secondary alternatives.

Youth's with developmental disabilities experience educational settings that at times appear uncertain and disruptive. They also feel a sense of not belonging or knowing where they fit in. In essence they could benefit from additional stability, continuity, a balance of internal/external support and opportunities for developing personal relationships.

Families at times feel isolated, even from the community in which they live and frequently do not know where to turn for assistance. Their needs focus around accessing accurate, reliable information and local resource people available to assist them in understanding.

The capabilities of the Volunteer Skills Data System in rural education are diverse. Voluntary citizen participation can play an integral role in complimenting and supplementing special education services through a variety of ways. Volunteers can provide increased one-to-one assistance, role modeling, help disseminate information regarding children and parent rights, serve as a resource person or liaison for children/youth, families and educational settings, provide additional tutoring assistance where appropriate, self-help skills training, transportation, facilitate transition from educational to post-educational alternatives through future planning, and provide personal/emotional support to children, youth and families.

Most recently, the Volunteer Skills Data System began exploring the possibilities of intergenerational activities. Whereby, senior volunteers, ages 55 and older, could assist children and youth in need of special or prolonged assistance. According to a publication entitled, A Guide to Intergenerational Programs, "In many communities the school system seems to invite the development of intergenerational programs. The schools have excess space because of decreasing enrollments, generally in convenient locations; and the schools, of course, have the children. They also usually need more volunteers-because of the increase in the number of mothers employed outside the home and unavailable as school volunteers. Resources in most schools are being stretched to cover the basics, reducing the potential for individual attention to school children. Older persons can offer experience, skills, patience, and time. They can meet some of the needs of many systems.

Intergenerational programs in schools can improve students' skills, levels of achievement, and self-esteem. Older persons can motivate and stimulate, while offering a positive adult role model. There are significant benefits to the older persons as well-primarily the opportunity to make a personal contribution, to continue to be involved in the community, and to be challenged and stimulated."

The Volunteer Skills Data System promotes the philosophy that screened, trained, and monitored volunteers can play a legitimate role in supplementing and complimenting the developmental disability service delivery system in South Dakota. In addition, the Volunteer Skills Data System is a viable approach to impacting the rural education system in South Dakota when perceived as an independent, innovative, free from conflict of interest community resource. Also a strength of the Volunteer Skills Data System is the perception that it is not direct service providing and only intended to compliment and supplement existing professional services of the developmentally disabled. Consequently, community partnerships have been formed with little or no resistance and with an attitude of cooperation. The Volunteer Skills Data System has been fully operational for approximately a year and a half and continues to serve as an integral part of the South Dakota Advocacy Project, Inc.

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- ACKNOWLEDGEMENTS -

The South Dakota Advocacy Project, Inc. gratefully acknowledges the interest, support, collaboration and opportunities provided by the following South Dakota agencies and organizations, in the development of a Volunteer Skills Data System: the State Office of Developmental Disabilities & Mental Health; the State Developmental Disabilities Planning Council; the South Dakota Association for Retarded Citizen's - State Office and affiliate chapters; State Office of Special Education; the South Dakota American Association on Mental Deficiency; the South Dakota Association of Community Based Services; the South Dakota Guardianship Program, Inc.; the Center for the Developmentally Disabled; the United Sioux Tribes of South Dakota Development Corporation; the Sioux Nation Commission on Aging; the South Dakota Office of Volunteerism; Redfield State Hospital and School; and numerous statewide service organizations.

The South Dakota Advocacy Project, Inc. would also like to extend special thanks to the Computer Center of Pierre, South Dakota for providing quality computer equipment, initial training, and technical assistance in development of a unique custom designed software program. In addition, special thanks is given to the Shared Communication and Assistance Network (SCAN) of Silver Spring, Maryland for providing further technical assistance in refinement of our software program and modem utilization orientation.

Further, the South Dakota Advocacy Project, Inc. would like to express their sincere appreciation to those very special volunteers that were willing to be challenged to expand the personal support network of persons with developmental disabilities in South Dakota. South Dakota has a tradition of volunteerism and we found that traditional continues across the state, at the community level, and through individual citizen participation.

Finally, the South Dakota Advocacy, Inc. would like to thank the Department of Health and Human Services/Office of Human Development Services and their Coordinated Discretionary Funds Program for the funding opportunity to develop such a vital project as the Volunteer Skills Data System. Appreciation is also extended to the Administration on Developmental Disabilities in Washington, D.C. and the Regional Office in Kansas City, Missouri, as well as the Federal Assistance Financing Branch in Rockville, Maryland, for their continued support and technical assistance during the length of the project.

It is the hope and anticipation of the South Dakota Advocacy Project, Inc. that the Volunteer Skills Data System will continue to become an integral part of the developmental disability service delivery system in South Dakota.

APPENDIX B

scan
Shared Communication and Assistance Network

April 21,1986

Mr. Ron Frame
Program Director
South Dakota Advocacy Project, Inc.
221 S. Central Avenue
Pierre, SD 57501

Dear Ron,

Please accept my sincerest thanks for the opportunity to work with you and your staff on your most innovative project. During my visit in November I found your staff to be highly capable and well-trained in both the technical and day-to-day operations of your project. I was especially impressed with the degree of commitment that Bob Kean has relative to the current and future involvement with volunteers there in South Dakota. In these uncertain budgetary times this strategy takes on even more significance than it had at its inception.

The software that you have developed to assist in the matching of volunteers provides a time saving, information management tool without which this sort of task would not be possible on a scale that would be of any real help. Especially impressive is the fact that it was developed on an inexpensive, commercially available database package that is operational on IBM, Apple, and other micro computers.

The only suggestion I have for strengthening the project concerns the development of a wider funding base that will facilitate access to professionals in other arenas that could benefit from the technology and programmatic strategy that you have developed. It is recommended that for that sort of cross-pollenization to happen, local or state funding must be provided to maintain, if not widen, your already outstanding efforts.

If I can be of any further assistance to you, please don't hesitate to call. Accept my congratulations on a job well done.

Sincerely,

Larry

Larry Searcy
Director, SCAN

American Association of University Affiliated Programs For Persons with Developmental Disabilities
8605 Cameron Street, Suite 406 • Silver Spring, Maryland 20910 • (301) 588-8252

APPENDIX C

AREAS OF VOLUNTARY CITIZEN PARTICIPATION

Expressive Volunteer: Establish a personal friendship.

Instrumental Volunteer: Help solve practical problems.

Associate Volunteer: Share extensive knowledge or expertise of a specific nature.

Crisis Volunteer: Intervene in a health threatening situation and/or provide emotional support.

Domestic Volunteer: Provide emotional support to parents, children and other family members of developmentally disabled persons.

Cross-Cultural Volunteer: Assist Native American developmentally disabled persons, families and other ethnic groups.

Tutorial Volunteer: Provide voluntary tutorial assistance to children identified as needing special education.

Advisory Board/Council Volunteer: Provide volunteer leadership assistance to handicap organizations.

Liaison Volunteer: Act on behalf of developmentally disabled persons between service providing agencies.

Residential Volunteer: Assist developmentally disabled persons placed in community living facilities, nursing homes and state institutions.

Fundraiser Volunteer: Assist in accessing and generating financial support for handicap organizations.

Recruitment Volunteer: Assist in the identification of potential volunteers.

Volunteer Skills Data System
South Dakota Advocacy Project, Inc.
221 South Central Avenue
Pierre, SD 57501
Phone: 1-800-742-8108 or 224-8294

Project Staff: Ron Frame, Program Director
Susan Kortan, Administrative Assistant

APPENDIX D

VOLUNTEER SKILLS DATA SYSTEM
VOLUNTEER APPLICATION

NAME____________________ PHONE(HOME)________ (WORK)________

ADDRESS____________________ DATE OF BIRTH______ SEX: M___ F___

____
CITY STATE ZIP CODE COUNTY

BEST TIMES, DAYS AND PLACE TO REACH YOU____________________

____

IN CASE OF EMERGENCY, WHOM MAY WE CONTACT (NAME & PHONE)?____________________

CHOOSE UP TO FIVE VOLUNTEER ROLES YOU WOULD PARTICIPATE IN. CHECK YOUR APPROPRIATE PROFICIENCY LEVEL.
(See attached descriptions, detach and keep)

	INTEREST ONLY	SERIOUS STUDENT	COLLEGE OR TECHNICAL SCHOOL DEGREE	ADVANCED DEGREE/ LICENSED PROFESSIONAL	CONSULTANT
(1) EXPRESSIVE VOLUNTEER					
(2) INSTRUMENTAL VOLUNTEER					
(3) ASSOCIATE VOLUNTEER					
(4) CRISIS VOLUNTEER					
(5) DOMESTIC VOLUNTEER					
(6) CROSS CULTURAL VOLUNTEER					
(7) TUTORIAL VOLUNTEER					
(8) BOARD/COUNCIL VOLUNTEER					
(9) LIAISON VOLUNTEER					
(10) RESIDENTIAL VOLUNTEER					
(11) FUNDRAISER VOLUNTEER					
(12) RECRUITMENT VOLUNTEER					

VOLUNTEER TRANSPORTATION/INSURANCE:

DO YOU HAVE A DRIVER'S LICENSE?__________ DRIVER'S LICENSE NUMBER__________

DO YOU HAVE AUTOMOBILE LIABILITY INSURANCE?________ LIST COMPANY__________

TIME AVAILABLE FOR DEVELOPMENTALLY DISABLED PERSON OR VOLUNTEER ASSISTANCE.

_______ MONDAY
_______ TUESDAY
_______ WEDNESDAY
_______ THURSDAY
_______ FRIDAY
_______ SATURDAY
_______ SUNDAY
_______ MORNINGS
_______ AFTERNOONS
_______ EVENINGS

REFERENCES (Other than relatives)

NAME ADDRESS PHONE

1.____________________ (HOME)______ (WORK)______

2.____________________ (HOME)______ (WORK)______

3.____________________ (HOME)______ (WORK)______

VOLUNTEER RELEASE

Having been informed about the purpose and activities of the Volunteer Skills Data System, I hereby give permission for information about myself, contained in the volunteer application, to be placed in the computer system.

It is my understanding that personal information contained in this application will not be given to any individual or entity without my expressed permission.

____________________ ______________
Volunteer Applicant Signature Date

APPENDIX E

VOLUNTEER SKILLS DATA SYSTEM

REFERENCE FORM

Reference Name ______________________________

Applicant Name ______________________________

1. How long have you know the applicant? ______________________________

2. What is your relationship to the applicant? ______________________________

3. Please select the one word or phrase which is most accurate.

   A. The applicant is: unreliable, usually reliable, very reliable

      (Staff - circle response. Ask reference for an example of a situation or circumstance which led him/her to select that particular response.)

   B. The applicant's attitude is generally: apathetic, interested, enthusiastic

      (Circle response, ask for example, document)

   C. Emotionally, the applicant: is very stable
      is usually stable
      experiences unusual extremes of excitability or depression

      (Circle, examples, document)

4. Please respond yes, no, or don't know to the following items:

Is the applicant:

Patient? ________________

Able to tolerate frustration? ____________________

Able to accept advice? ____________________

Able to relate to _______________ children? _______________ adults?

(If a response is no, ask probing questions to get more information and document below.)

5. What makes you feel this applicant might be a good advocate? (Document reply)

6. In your opinion, what limitations or problems in the applicant's past history might affect his/her ability to be an advocate? (Listen very carefully for hints of problem areas. Probe subtly for answers to questions you have.)

7. Do you have any other comments about the applicant?

8. Additional comments by staff.

____________________________ ______________
(Signature of Staff) (Date)

PERODIC VOLUNTEER REPORT

Since you are very important to the Volunteer Skills Data System, we need to keep in contact with each other on a monthly basis. We realize you are very busy and your time is valuable; however, would you please check you answers to the questions below and return this report by mail as soon as possible? You are welcome to add any comments.

1. Your name ____

2. Your client's name ______________________________________

3. How often did you contact your client this month?

________once a week
________twice a week
________more

4. Did you visit your client in person?

________once every two weeks
________once a week
________more

5. In what activities did you and your client participate?

________recreation (specify) ______________________________
________visiting places of interest
________movies
________shopping
________trips
________client's home
________church
________other group or organizational meetings
________other (specify) __________________________________

6. You may find it helpful for you and your client to set a goal to work toward each month based on your client's needs. If so, please write your plan below.

a. Goal for past month ____________________________________

____

Activities to meet this goal ________________________________

____

Successful?

________yes
________somewhat
________no

b. Goal for next month ____

____

Comments ____

____

7. Can the staff help you? We want your ideas, problems, and comments.

____

____

Volunteer Skills Data System (VSDS)

-Computer Program Description-

Selecting an appropriate computer system that was cost effective and capable to handle our anticipated data management needs was one of our first tasks. After considerable product research was conducted, the South Dakota Advocacy Project, Inc. (Advocacy Project) decided on acquiring a Kaypro 10 hard disk business computer. The Kaypro 10, more than adequately, met our budgetary and software needs. In addition, the Kaypro 10 is a portable computer that allowed us to conduct demonstrations at conferences and workshops.

Other computer related equipment that was acquired and essential was an Epson FX-100 printer and a DS1200SMT modem. The DS1200SMT modem was acquired to provide us with the capability of communicating with other compatible computer systems for sharing information. In addition, it provides us with electronic mail capabilities, access to computer bulletin boards and other resource databases through the national SCAN (Shared Communication and Assistance Network) program located in Silver Spring, Maryland. SCAN has been developed by the American Association of University Affiliated Programs for Persons with Developmental Disabilities (AAUAP).

After the computer hardware package was acquired and installed the next task was receiving computer training and development of a custom designed software program. These activities were initially provided by the supplier of the Kaypro 10 computer system.

Upon receiving orientation and design of the software program, it was decided to utilize the Dbase II component. Dbase II enabled us to create a comprehensive and unique database system appropriate for our project needs. The Dbase II also lends itself to easy adding, deleting, editing, displays and prints data from the database, providing a large measure of program/data independence.

The Volunteer Skills Data System software program is designed to browse through volunteer and client files located by county. The files have been programmed and keyed to correspond with both the volunteer and the client application forms. The volunteer file is designed to contain basic information such as: name; address; county; telephone numbers; anniversary date which signifies when the volunteer was approved; skill levels; availability of the volunteer; proficiency levels; and comment section. The client file is essentially designed the same way with a few exceptions such as: sex; birth date; ethnic group; impairment; living arrangement; availability; volunteer preference; expressive and instrumental needs. In addition, a hard copy resource base of the volunteer and client applicants are maintained for back-up purposes, as well as, all computer data is placed on floppy disks.

Gary Boswell, Supervisor
Hearing Conservation/Education Services
Green Valley Area Education Agency 14
Green Valley Road
Creston, Iowa 50801

HEARING CONSERVATION AND EDUCATION IN RURAL AREAS

The Green Valley Area Education Agency 14 is an intermediate educational service unit in the state of Iowa. Dr. Patrick T. Kelly is Administrator of the Agency and Harold Connolly is Director of Special Education. The agency serves eight counties in southwest Iowa, covering an area of 3,800 square miles. Services are offered to children from birth through high school. In 22 school districts, 12,783 students are served, along with 4,750 preschool children. These children are served at 67 public school attendance centers, 4 center-based handicapped preschool sites, 32 private preschool programs, and numerous clinics and special project sites. There is no charge to parents for services provided by the agency.

Area Education Agency 14 contains three major divisions: Special Education Services, Media Services, and Educational Services. The area of Special Education provides services in the following areas: Hearing Conservation/Education, Psychology, Speech and Language, Hospital/Homebound, Physical and Occupational Therapy, Child Diagnostic and Planning Service, Work Experience, Visually Impaired, Music Therapy, Parent Coordinator, and Itinerant Preschool.

This presentation addresses the following general conference topical areas: Early Intervention, Health Services, Interagency Collaboration, Least Restrictive Environment, Assessment/Diagnosis, Rehabilitation Services, and Technology.

The purpose of this presentation is to describe how our agency provides services in the area of Hearing Conservation/ Education to preschool and school-aged individuals in our rural area. The goal of the hearing department is to obtain the optimum educational experience possible for each and every child by minimizing hearing loss and providing support for those children with hearing impairment within the local school programs. Two audiologists, two audiometrists, and two itinerant teachers of the hearing impaired provide prevention, identification, counseling, rehabilitation, and education services.

One of the rural issues we face in hearing testing is how to provide a quiet test environment and modern testing equipment for approximately 100 testing sites spread over eight counties. Much criticism has been aimed at school hearing testing in the past because of noisy test environment and poor equipment, as compared to what is available in urban areas. We solved this problem by purchasing two mobile hearing units, one in 1977 and another in 1985. The mobile units provide a waiting/work area, storage, an audiometric sound room, and a clinical work area. This allows us to take an excellent test environment and equipment to each of the schools and clinics. By using the latest technology in the area of computers and testing equipment, we have tripled the number of students we can see without increasing staff size. Most of our report writing, record keeping, and form completion is done on computers, freeing up staff time for direct student and parent contact. Last year over 16,000 forms were automatically printed from a student data base.

At the present time, the hearing department is using an Apple /// computer, a profile, a letter quality printer with a cut-sheet feeder, an Apple // computer, and an ImageWriter II printer with a cut-sheet feeder. Software programs include Word Juggler, /// E-Z Pieces, Quick File, and AppleWorks. We have purchased new equipment and begun to implement a new data base. We will be using two Macintosh Plus computers, an external disk drive, and a Macintosh Hard Disk 20. Software includes OverVUE, Microsoft Word, Omnis 3 Plus, Sidekick, MacLightning, Switcher, and MacServe. The hearing department will be tied in to a Central Data Base for the Agency. Several Macintoshes will be networked Via Apple Talk to a 110 Megabyte Sunol hard disk. The central data base will allow all special education departments to share general information for each student, cutting out much duplication.

Hearing screening tests are routinely administered to children in grades K-6, 8th and 11th, as well as to all special education and new students. All students receiving speech therapy are also seen. In addition to school sites, hearing screenings are conducted at all preschool and nursery school programs, Headstart programs, community preschool screening projects, and kindergarten roundups. Complete hearing evaluations are conducted on children who have difficulty with screening tests, on those referred, and on those with known hearing losses. During the 1985-86 school year 11,017 hearing screenings and 4,456 hearing evaluations were performed.

Consultation services are also provided for hearing impaired children and their parents with aural rehabilitation activities such as auditory training, speech reading, early language stimulation, and parent-home training. In addition, instructional programming, itinerant instructional support services, and educational monitoring are provided. In the past, most of these students would have been sent to the State School for the Deaf, which is a more restrictive environment. The itinerant teachers of the hearing impaired and audiologists travel the eight counties consulting, teaching, monitoring, counseling, and providing assistance for approximately 25 hearing impaired students. Because of the differences in age, hearing loss, Individual Educational Programs, and miles between students, we do not have any hearing impaired self-contained classrooms.

Another rural problem is access to medical specialists. Our hearing department assists with multi-agency programs bringing medical specialists from the urban areas of Iowa to the local level. Multi-agency programs include Child Diagnostic and Planning Service, Child Development Fairs, Ear, Nose and Throat Clinics, High Risk Infant Follow-up, and Multi-agency staffings. Local business and service clubs, along with interested community people, are also involved in purchasing hearing aids for needy children.

Child Development Fairs or Child Finds are preschool screenings conducted by volunteers, the Area Education Agency, local schools, other agencies, and community professionals providing speech, hearing, vision, dental, growth assessment, developmental, and immunization checks. Follow-up is provided for those children needing further assessment.

Child Diagnostic and Planning Service is a community based cooperative multi-agency planning service for children ages birth to 18 years. The purpose is to integrate aspects of medical, educational, environmental and social services. Services available include referral information, monthly clinics, and inservice programs. Agencies participating include the Green Valley Area Education Agency 14, the Department of Social Service, Crossroads Mental Health Center, County Extension, Iowa Child Health Specialty Clinics, Creston Greater Community Hospital, Creston Medical Clinic, and Iowa

Rehabilitation, Education and Services Branch. Children having problems with social skills, learning problems, or having suspected or confirmed handicaps can be referred to this clinic by local physicians, public health nurses, school personnel, parents, agencies, or interested individuals. Last year 49 children were seen in the developmental portion of this clinic.

A part of this community program is the Ear, Nose, and Throat Clinic, a free diagnostic clinic. All referrals have their hearing checked by an Audiologist, speech evaluated by a Speech Clinician, and a medical ENT examination by a Otolaryngologist. Other agencies are available to help on a referral basis. Last year, 784 children were seen at the ENT clinics.

In summary, we believe that we have established an efficient and effective model for providing hearing testing and education for hearing impaired students in a rural setting. Our hearing staff, working with parents, personnel from other agencies, community support people, and team members from the Green Valley Area Education Agency 14 are helping students stay in the least restrictive environment and receive a quality education.

James McAreavey
Northern State College
Aberdeen, SD 57401

Family-Professional Relationships
(Inter/Intra Personnel Communication Skills for Rural School Personnel)

The purpose of this lecture/demonstration is to present a strategy for rural school personnel as a means for assuming a mediating role between themselves, a family, and/or exceptional person. This strategy is designed to be used by their natural home or school life personnel in mediating life experiences. The premise is that school personnel in rural areas need to develop ways to talk with and effectively counsel parents and the exceptional person. Rural folks cannot conveniently refer problems to outside agencies, or economically afford to employ trained psychotherapists to sufficiently meet the needs of the exceptional child and their parents. This strategy promotes inter/intra personnel communication skills, stress relief, role mediation, and how to cope and adjust to those misfortunes in life.

The objective is to assist rural school personnel in the development of inter/intra personnel communication skills and to become better observers and interpreters of the behavioral traumas experienced by parents of exceptional children and the child as they move through the developmental stages of life. This lecture/demonstration will establish the need for the development of inter/intra personnel communication skills and a means to the end via an aural presentation of the strategy and a video demonstration.

MEETING NEEDS OF YOUNG HANDICAPPED CHILDREN IN RURAL/REMOTE AREAS: "THE EARLY CHILDHOOD SCREENING KIT"

Sue Detroy, M.Ed.
and
Christine O. Cheney, Ed.D.
College of Education
University of Nevada-Reno
Reno, Nevada 89557

Nevada has a unique population distribution which presents difficulties for most human service providers. There are two counties in the state which contain both urban and remote communities. The remaining 15 counties are entirely comprised of rural and remote populations. The 1980 Census of Population estimates that there are approximately seven people per square mile in Nevada.

Based on 1985 official state population estimates, in rural/remote Nevada there are 440 children under the age of three who are at risk for or who have developmental delays and handicapping conditions. The majority of these children are unidentified or underserved according to the State Department of Education. Although all 17 counties in Nevada are charged with Child Find responsibilities, the State Department of Education assesses these Child Find plans and systems to be inadequate. Presently, only three of the 17 Nevada school districts serve children under the age of five. Specialized therapy services generally are unavailable in rural/remote communities and the cost of therapists travel to rural counties can be prohibitive.

Project PACEER (Parents And Children Early Education Resources) of the Research and Educational Planning Center, University of Nevada-Reno, is an early childhood special education demonstration project funded through the U.S. Department of Education, Office of Special Education and Rehabilitation Services. As part of the development of the project service model, PACEER staff wrestled with the problem of how to disseminate the expertise and procedures developed in the demonstration classroom to the rural areas of the state. In order to develop an approriate plan for the delivery of services, three questions had to be answered: (1) what were the needs pertaining to young handicapped children in rural communities, (2) what were the demographics of those needs, and (3) what vehicles already existed that could provide support or a framework for extended services to young handicapped and at-risk children?

The identified needs in rural communities included more thorough child find procedures for identifying young children suspected of having developmental delays, and the delivery of appropriate special education curricula to these children. PACEER identified daycare centers in rural Nevada as sites in which child find efforts could be expanded. These daycare centers could also provide a framework for the delivery of special services to children who may require them.

The "Early Childhood Screening Kit"

In response to the need for training of daycare workers in the identification of handicapped children, PACEER developed the "Early Childhood Screening Kit." This kit is a collection of audio-visual and printed materials with supporting resources. It is designed to be used in two possible ways: (1) as a self-instructional resource for those desiring enrichment or general information, or (2) through an inservice training format for centers wanting more in-depth training and follow-up support.

The materials lead users through a series of steps to help them develop and implement a program to screen children from birth to three years of age. Additional resources could be used by centers to plan appropriate curricula and activities for those children identified as being delayed or at-risk.

While the materials were developed with daycare center personnel as the target audience, they could also be used by a variety of professionals interested in the development of young children: Public health nurses, community college and university students, and early childhood educators.

The materials in the "Early Childhood Screening Kit" are divided into four modules:

1. Normal Development and Warning Signs of Possible Delay;
2. Screening Procedures;
3. Conferring with Parents, Referral, and Follow-Up;
4. Approriate Curricula for At-Risk or Delayed Children.

Each module contains one or more videotapes. Each tape is accompanied by an interactive manual which serves to reinforce the material covered, generate discussion between the participants, and to give pre and post tests to the viewers by which they can judge their attainment of the information presented. The modules also contain supporting resources, references and bibliographies. Table 1 outlines the modules and the materials contained in each.

Awareness materials introduce the kit to potential users and briefly describe the benefits of adopting the screening process. These include (1) increased quality of services to their clients, (2) staff development and fulfilling continuing education requirements, and (3) identifying and possible ameliorating developmental delays in young children of their community.

Implementing Inservice Through the Kit

A process for contracting with daycare centers in order to more fully evaluate and support their screening procedures and follow-up activities is currently being developed. It is envisioned that when a daycare center director requests inservice delivery of the kit and materials, collaborative

TABLE 1

Materials Contained in the
"Early Childhood Screening Kit"

Module	Materials
Normal Development & Warning Signs	* Fine Motor and Feeding Development (videotape and interactive manual) * Speech and Language Development (videotape and interactive manual) * Gross Motor Development (videotape and interactive manual)
Screening	* DDST Training Tape * DDST Manual and Protocols * Identifying Hearing Loss in Young Children (videotape and interactive manual)
Conferring with Parents, Referral, & Follow-up	* Parents Helping Parents (resource book) * Referring Young Children with Suspected Developmental Delays (videotape and interactive manual) * Early Diagnosis and Treatment of Ear Problems (videotape and interactive manual)
Curriculum	* Curriculum Planning for Handicapped and Non-Handicapped Toddlers (videotape and interactive manual) * Learning Games for the First Three Years * Inventory of Early Development * Developmental Programming for Infants and Young Children, Vol. 1-2 * Hawaii Early Learning Profile * Things To Do With Toddlers and Two's * Dear Mom and Dad

planning would begin. Thorough discussions would be held of the ramifications of adopting the screening model, the modules which would be emphasized, and the level of implementation that would be achieved. The director would have to demonstrate a committment to establishing and maintaining the screening process by accepting the potential procedural changes involved, allocating staff time for screening, allocating time for training, and modifying the budget where necessary to finance the new initiative. Through advanced planning and discussion, the committment of the director could be insured and a contact for inservice training and follow-up services would be developed.

Modules of the kit with potential levels of adoption are outlined in Table 2. Collaborative choices could be made as to which modules would be adopted and what behaviors assure acceptable or ideal implementation of the model.

For other professionals or for centers not committed to the development and evaluation of a total screening program, the kit may be used on a self-instructional basis to introduce basic concepts related to early childhood special education. These include sequences of normal development and warning signs of possible delays, referral sources and services for young handicapped children, family reactions to grieving and stressful news, and appropriate environments, routines, and activities for infants and toddlers.

The Development Process--Lessons and Pitfalls

The PACEER staff embarked on the enterprise of developing the "Early Childhood Screening Kit" with great enthusiasm but very little production expertise. In the process of development, many mistakes were made and lessons were learned. These experiences may be of benefit to others attempting to develop training materials for rural service providers.

Projects of this nature are evolutionary. As products begin to take

TABLE 2

Modules and Levels of Implementation
Early Childhood Screening Kit

MODULE	LEVELS OF ADOPTION		
	Ideal	Acceptable	Unacceptable
Normal Development	1. Apply knowledge of normal developmental patterns in children to curriculum and to identification of at-risk children.	1. Be aware of normal developmental patterns of children.	1. Be unaware of normal developmental patterns of children.
Screening	1. Identify staff person to screen all children. 2. Select screening tool. 3. Train staff person to use screening tool. 4. Write summary of screening results for each child.	1. Identify staff person(s) to screen all children. 2. Select screening tool. 3. Train staff person to give screening.	1. Unclear screening process and procedure. 2. Improper administration of screening tool.
Conference with Parents,	1. Review screening results with all parents individually.	1. Review screening results with only parents of children who are to be recommended for referral.	1a. Send screening results directly to referral source. b. Interpret resluts as a diagnosis. c. Do nothing with results.
Refferal and Follow - Up	2a. Make referrals for local/state child evaluation and parent support. b. schedule follow-up meeting with parents in 2-4 weeks. 3. Request evaluation reports from referral source	2. Refer child for local/state evaluation.	2. Make no referrals.

Appropriate Curriculum	1. Establish a safe, child-oriented and organized environment. 2. Establish a daily routine. 3. Pre-plan daily, age-appropriate activities. 4. Implement referral sources' recommendations for each child with special needs.	1. Establish a safe, child-oriented environment. 2. Establish a daily routine. 3. Provide daily, age-appropriate activities.	1. No daily routine. 2. No materials available. 3. No planned, daily activities.

shape, new directions are taken, old ideas are discarded. The most important component is to take the time necessary to clearly identify the target audience, purpose, and components of the training. These serve as a roadmap through the twists and turns of the developmental process. Flexibility is essential.

It is recommended that a formative evaluation procedure be used during product development. This includes the production of small portions of the training followed by tests on groups of "guinnea pigs." This early feedback will enable modifications to be made before the entire product is developed (after which time modifications become more expensive and difficult). A pre-test/post test model enables developers to determine whether the objectives of training are being achieved, and the effectiveness of the instructional materials can be continually improved.

In producing the videotapes for each module, we learned the difference between content expertise (which we had) and technical or media expertise (which we did not have). Be sure to get the technical assistance and training necessary at the outset of the project. Such training can forstall many of the delays caused by attempting "amature" production with poor-quality results.

It always seems to take twice as long as planned to effectively develop training materials--timelines become impossible to adhere to. Allow for unforseen complications and delays by doubling the estimated time developers think a project will take!

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Presenter: Patrick A. Lawrence, Ed.D.
Department of Special Education
University of South Alabama
Mobile, Alabama 36688

Developing Effective Parent-Professional Partnerships

A Rationale

It can be said that in many respects parents are perhaps our most valuable and under-utilized resource in the education of children. Whereas educators control approximately 15,000 hours of a child's waking life between grades one and twelve, parents control almost 40,000 hours, or two-thirds of a child's waking life during that same time period. Recent reports on effective schools have frequently cited the active involvement of parents as a key element in quality education programs.

A true partnership between parents and teachers and related professionals is especially crucial in the education of handicapped children. The special needs of children with handicaps impose extraordinary demands on both teachers and parents. Developing a successful parent-professional partnership can mean a significantly enhanced educational experience for a non-handicapped child, or the difference between success and failure for one with a handicap.

The potential benefits of such a partnership are tremendous. Anticipated benefits to the child might include increased recognition of academic accomplishments, expanded time on tasks through help with homework, and behavior expectancies which are consistent across settings. The parent might gain a broader understanding of the child's abilities, additional knowledge of related support agencies, and a sense of being able to positively influence behavior and academic success. Through the involvement of the parents, the teacher gains additional information relating to the child's developmental history, likes and dislikes, and eating and sleeping patterns, as well as a powerful extension of classroom-related academic and behavioral goals. Even the school beneits through the reduction of grievances against school policies as well as community support for related revenue enhancement.

Developing a partnership

A partnership must be based on equality, mutual respect, and an exchange of knowledge and skill. Parents must be, and are becoming, better informed regarding instructional theory and the role of schools in society. Teachers and other professionals must recognize the special knowledge base of each parent and proceed from the assumption that each parent cares at least as much about the academic success of his or her child as the professional does.

A partnership, to be maximally effective, must provide an active role for all members. We know from research into managerial and administrative models that committment to program goals and particularly to the implementation of those goals is enhanced through shared decision-making. In other words, the more parents feel that they have been involved as participants in the development of policies and activities, the greater the likelihood that they will be involved in the active implementation of those policies and activities. Consequently, the following model is proposed as a way of conceptualizing parent involvement, and the process of designing activities to maximize that involvement.

	Role of Parent	Degree of Participation	Type of Participation	Communication Flow
Level 1	Adversary	Minimal	Negative	0 --->
Level 2	Neutral	Average	Passive	--->
Level 3	Partner	Maximum	Active	<--->

Level one involvement of parents often characterizes schools which are ineffective both in the education of children and in developing a positive community idenity. Parents are viewed by school representatives as adversaries, and parental participation beyond legal requirements is generally either actively or passively discouraged. When parents do become involved in school policy, that involvement is often from a negative or critical posture.

Level two involvement probably encompasses the overwhelming majority of schools, both rural and urban. Parents are perceived as neither an especially positive nor negative factor. A few parents become involved in school activities, but most do not. The school will typically design policies and school-related activities and inform parents through parent-teacher conferences, open houses, and perhaps a school newsletter.

Level three stresses an active, participatory role for parents based on principles of equality, partnership, and shared decision-making. There is an on-going attempt to maximize involvement, and a clear effort to solicit information and ideas from both parents. A vigorous attempt is made to involve parents in policy-making and implementation both at the building and classroom level. It is only at level three that parents and professionals become true partners in the education of children.

To illustrate the differences between levels 1, 2 and 3 some examples of building and classroom activities at each level are provided:

Level 1

- The development or modification of discipline procedures without informing parents.
- Calling parents only when a child has misbehaved.
- Using parent-teacher conferences to assign blame to parents.
- Suspending students without working out a plan with parents to prevent reoccurrence.

Level 2

- Weekly report cards.
- Invitations to parents to see special projects or events.
- Sending parents a monthly calendar of events.
- Sending home awards for student achievement.
- Regular school or class newsletter.
- Telephone calls to share positive information about a student.
- Developing sessions to train parents.

Level 3

- Invitations to parents to help plan school or class projects, events, and field trips.
- Invitations to parents to speak to the class about their jobs or special interests.
- Developing parent-teacher training sessions based on parent needs assessment and parent input.
- Visit parents in the home.
- Use a notebook sent home with a student to regularly carry messages back and forth.
- Telephone calls to solicit information and opinions from parents.
- Invite parents to participate in interviewing prospective teachers and administrators.

Teacher's and other professionals in rural communities have an increased opportunity to develop effective partnership with parents. Parents are less mobile and more likely to develop ties to community agencies than their urban counterparts. Developing an active, participatory parent role in rural areas can add tremendously to the resources available to a school or classroom.

GENERAL SESSION

FRIDAY, MARCH 20, 1987

8:30 - 9:30 AM

Larry Campbell, Director of Education and Rehabilitation, Helen Keller International, Inc.

When I visited ACRES a couple of years ago in Bellingham, I left with a degree of exhilaration that I have not had in encountering other professional groups in this country. For the first time I felt that, in expressing the kinds of issues and problems that I deal with on a day-to-day basis in working with governments and private organizations in developing countires, there was a real communication there–a real camaraderie. We're faced with creating programs where financial resources are scant and services are in high demand. We have a limited number of professional personnel to cover broad geographic areas, and probably most importantly, we're serving populations with a distinct rurals need base–populations which are often forced into systems designed by individuals with an urban mindset. For those reasons I think there is a great deal of commonality between what I do in the developing world and what you folks are doing on a day-to-day basis here in the U.S.

The scope of the problem of special education and rehabilitation in the developing world is enormous. Just to give you a thumbnail sketch of the situation today–the World Health Organization, UNICEF, and UNESCO estimate that there are about four hundred fifty million disabled individuals in the world today. Three hundred million of those live in the least developed countries of the world. Mortality rates among disabled children are astronomically higher than they are among their non-disabled peers in the developing world.

In 1978-79, I did a follow-up study on nutritional blindness that a group of scientists who work for us had undertaken. The scientists were conducting a national prevalence survey in Indonesia to identify the rate of nutritional blindness--blindness caused by lack of Vitamin A in the diets of children under five years of age. From the service delivery standpoint I was concerned that the teams were reaching some of these children very, very late, and that we had a moral obligation to provide some services to the families of these children. Within six months we had followed the research teams into the villages and found that 50% of those children identified as blind from nutrional blindness were already dead. These were all children under the age of six. This is just one example of the impact mortality rates have on the disabled population in the developing world.

Public attitudes are another barrier encountered regularly through fear, superstition, and lack of basic understanding of what is possible. Life in the developing world--as those of you know who have lived and worked there--is tough. Survival is based on the ability to produce, and non-disabled individuals who are not able to produce in society take a back seat in the family and in the community infrastructure.

Education, for the most part, is nonexistent for disabled children. In most countries where I am now working, less than 2% of disabled children have any type of formal or non-formal education available to them. In short, it's not a very pretty picture, but it is a picture that hopefully will change in the years ahead. Part of the reason educational services are so limited is because program models have been developed by well--meaning individuals who have based their service delivery systems on western-based models which are not culturally and economically viable in the developing world. A very good friend of mine from a developing country refers to the development of services in his region as the "lady this" and the "lord that" syndrome. Most of the services have been developed by the wealthy elite in a somewhat patronizing way as a 'do-gooders' attempt to do something for disabled individuals.

Other programs have been started by missionary groups and organizations like ourselves, who 50-60 years ago offered sheltered workshops, residential schools, and center-based rehabilitation facilities. While those programs have built some sort of a professional infrastructure in many countries, they also are very limited in terms of the numbers of individuals served and the appropriateness of the services. But the situation is changing, and despite momentary set-backs, I do see things moving forward.

Over the last four or five decades a rather curious chain of events has led to two very powerful movements which are going to irrevocably shape and change the lives of disabled people in the third world. It began with Mahatma Gandhi and his struggle for independence and freedom in India. Now you may be saying to yourself, what does India's struggle for independence have to do with special education and rehabilitation? Gandhi's non-violent struggle for independence developed a mind-set in individuals in developing countries that said they could control their own destiny. It was Gandhi who taught us that there are geniuses in every village and that all we really need to do is find those geniuses, create awareness of them and turn them loose on the problems of the community. The Chinese revolution gave us the barefoot doctor, a concept which has lead to the primary health care movement in the developing world. This movement focuses attention away from traditional curative medical models and examines primary level preventive models of medicine with emphasis on the use of paraprofessionals and paramedical staff.

Another example was a chap by the name of Ralph Nader, and a funny little car called the Corvair which really started the consumer revolution worldwide. I don't think any of us would have thought those many years ago, when Ralph Nader went head-to-head with General Motors, that the impact of his efforts would be felt so widely. But today, organizations such as Disabled Peoples International are mobilizing disabled people to take charge of their own lives and, as consumers, to be actively and fully involved in the development of services for the disabled.

Our founder Helen Keller, through her own personal triumphs and inspiration, changed the mind-sets of many government leaders. Last month I had the pleasure of meeting Rajiv Gandhi who talked about how his mother had met Helen Keller and what an incredible impact her interaction with Helen Keller had had on her, and subsequently on her children and their commitment to working with disabilities. The blindness prevention program in India is one of the leading blindness prevention programs in the developing world. It's curious that the origins of that program can be traced back to a visit that Helen Keller made in the fifties, and inspired a generation of leaders not only in India, but throughout the developing world.

This perhaps seemingly unrelated series of events--Gandhi's struggle for India's freedom, Mao Tse-tung's communist revolution in China, Ralph Nader's attacks on General Motors, and the travels of Helen Keller--are not so unrelated because there are two massive movements that are underway today which will shape the future of disabled people in a unique way. They will shape the future of programs, not only in developing countries, but lessons that developing countries have to teach us in the so-called "developed world."

The primary health care movement focuses attention on prevention of disability at the most basic level of the community. The use of non-medical personnel has revolutionized health care in the third world, and problems such as nutrional blindness and cataracts are now being handled by non-medical personnel.

Our own field workers provide rehabilitation services to treat children with the early stages of xerophthalmia, with a 2-cent Vitamin A capsule which will either prevent or reverse the signs of nutritional blindness. They can also refer cataract patients to paramedical personnel who have been trained to do cataract surgery.

The other major program, along with the primary health care program, which is greatly affecting the lives of disabled people in developing countries, is the community-based rehabilitation movement. For many years, organizations such as ours exported western-based approaches to the education and rehabilitation of disabled people. In the late 50's and early 60's, following the revolution in China, in an attempt to improve the health care structure of that country the barefoot doctor concept was developed. Our regional director in Asia had the opportunity to observe first-hand the barefoot doctors at work in China, and was able to make the leap from medical intervention to education and rehabilitation intervention. Twenty years ago our programs in Asia, Latin America, and Africa were increased the amounts of resources for services each year but experienced only a modest increase in the numbers of individuals who were actually being served by those programs. The reason for that was fairly simple. Eighty percent of the disabled people lived in rural environments. What we did however, was to uproot those individuals from their rural villages and move them to urban centers to provide training. In doing so we violated what I feel is the greatest strength that the developing world has today, and that is the extended family structure. It's the basic fabric of society in rural communities; it's something that is a great asset to education and rehabilitation programs, and should be something that we build upon--not tear apart.

Last, and perhaps most importantly, is the fact that the community was not involved in the process from the outset. Therefore, their perceptions of the disabled person did not change at all. These disabled individuals returned to their villages enthusiastic, motivated--and let's--assume, equipped with skills that they could use, and the family members immediately prevented them from using those skills. For example, they might pick up a machete, and someone would say, "Don't do that - you'll cut yourself." They would go near the cooking fire only to be told they might burn themselves. They couldn't go to the well because they might fall in.... Unless the individual is very determined, that individual is going to become passive and take what's left on the table, and that is very little.

The solution to the problem seems to me to be as simple as the analysis of what the problem was in the first place. That is, if education and rehabilitation services are to be developed for large numbers of disabled people in the developing world, what is needed are observations of village life, where the key entry points in that community are, and learn about what is preventing that disabled individual from participating more fully in the life of his family and his community.

We need to identify cadres of trainers who don't need to be highly trained professionals. They need to be individuals who are respected and trusted members of that community who speak the local dialect and can get things done. Once those individuals have been identified, simple training allows them to provide basic services to disabled people at a low cost in a very practical manner, and, most importantly, to involve the community from the outset in the process.

We create awareness at the village level in many ways. In most instances, the problems continue to exist simply because people aren't aware that simple solutions are available. Awareness is created through community leaders--not through outside experts telling people what should or should not be done, but by working with the respected community leaders in those villages. I returned last week from Sri Lanka, where we are experimenting with a new approach to identifying disabled people at the community level. For many, many years community-based programs have used a house-to-house survey method to identify disabled children and adults. We know the approach is very effective but also very time consuming. When volunteers are used to survey and identify the people with disabilities, many direct service hours are lost. What we want to do is cut down on the amount of time on surveys and put that time into direct services.

About a year and a half ago I began to experiment with the concept of using key informants at the village level to identify disabled people. We know the house-to-house survey, if done according to the established criteria, will identify all disabled people in the community because it calls upon the worker to physically see each member of that community. Frequently, this means going back to a home four, five, or six times until every member of that household has been seen. Through the key informant approach, we have identified five or six common leaders in each community. Generally, this is the Buddhist priest, the aruvedic physician--who is the traditional healer that the village members go to first for medical treatment–the washer woman, the government agent, the school teacher. Those are all people considered to be knowledgeable of the community, and what we have done is identify disabled individuals through the key informants.

The second approach is to go to local schools, talk to school children in the primary schools and have them help us identify disabled people in the community. Finally, when we have both lists from the two sets of informants, we do a house-to-house survey to verify the results. Interestingly enough, the preliminary results seemed to indicate that school children are among the most knowledgeable individuals in the community.

Last week, when we did an on-site visit with some of the teams in the villages, we had a humorous reminder of this. Instructions had been left with the team to simply go about their work and not to wait for us to arrive. We wanted to do an on-site visit and just catch them. We didn't tell them what time we were coming. We just said we would be stopping in the villages sometime during this three day period.

We parked the Land Rover and walked because there are no roads into these villages. As we trekked along we began to ask one adult after another, "Have you seen the survey team that's in".."Oh, yes, they just went that direction." So off we would go on this path and we would find someone else and they'd say "No, no, they went off that way." Finally, the chap who insisted that I include school children in this survey said to me "Wait a minute. There's a little kid about six years old, he'll know." And sure enough, not only did he know the right direction, he led us there immediately. I began to think to myself–when I was a child in my neighborhood, who knew all of the gossip? Who knew all of the stuff that you probably shouldn't have known? It was the young kids at that level. I think they're going to turn out to be a very good referral system for identifying disabled people at the community level. That's a good example, I think, of needing to adapt things to the local situation.

We've learned a lot of lessons over the last twenty years as we've shaped and developed community-based rehabilitation programs in the developing world. We've learned that you can change attitudes, but you can only change attitudes if you allow the community to create the solution. I have no solutions for developing countries.

What I can do is act as a catalyst and a facilitator. I can also allow people to share what I have learned in other countries. But the solutions must come from that community, and if there is not the motivation, the desire, the awareness to create that solution at a community level, no amount of outside input is going to change the long-term situation.

We've learned that these programs are economically much more effective than other program models. In several studies we have documented cost savings of 25-62% in the delivery of services to rural populations using these community outreach approaches. This is very important because ministers of education and health have enormous problems facing them. Disability is only one of them, and we need to develop program alternatives on an economic as well as a humanitarian basis.

The final thing that I wanted to say to this group and to challenge you with is to find a mechanism, perhaps within ACRES, for developing an international exchange. The theme of your conference is "Linking Programs and Resources." I hope, as you move ahead over the next year, you will begin to broaden the scope of that challenge to move beyond the borders of the United States. I think there are many valuable resources within the ACRES community which could benefit from infusions from developing countries, as well as ACRES providing assistance to rural special educators in other countries. I recently submitted a grant to the U.S. Department of Health and Human Services to identify innovative community-based models for developing countries which have lessons contained within them that could be applied to hard-to-reach–that means rural--populations in this country. It would be an exciting venture to work with you, because we are living today in this era of communication and transportation in a global village. The world is a very small place. What happens here today affects something that's happening in Thailand or Indonesia tomorrow, and vice-versa. I think there's a great deal that you have to offer to your colleagues in the developing world, and, just as importantly, I think there are many lessons that they have to share with you that could be of use to you as you deliver services to rural populations in this country.

Thank you.

CONCURRENT SESSIONS

FRIDAY, MARCH 20, 1987

9:35 - 11:00 AM

Dr. A. Sandy Parsons
Coordinator: Early Childhood
  Special Education
Program for Exceptional Children
Dept. of Educational Psychology
College of Education
University of South Carolina
Columbia, S.C.   29208

EARLY INTERVENTION IN RURAL STATES

THE IMPACT OF PL 99-457

Recent legislation, P.L. 99-457: The Amendments to the Education of the Handicapped Act, was signed into law by President Reagen on October 8, 1987. This new law reauthorizes P.L. 94-142, The Education for All Handicapped Children Act for five years, and expands it to include incentive grants for states to educate handicapped children from birth to age two, and from three to five years of age. Special education programs for three through five-year-olds would become mandatory for states serving this age level within four years (P.L. 99-457).

The law has five titles. Title II, provides stipulations for services to the three through-five year old age level. Title I provides discretionary monies through a state grant process for provision of services to birth through two-year-olds. The titles provide very different stipulations as to how funding is sought, and about agencies that are to provide services.

Rural area districts will face challenges in coordinating services for these children and must seek information on procedures for delivering services. The state education agency will be coordinating services at the three through five-year-old level. The governor of each state will identify the lead agency for serving the birth through two-year-old population. There are important considerations in funding levels. Although this is not a totally mandated law, failure to serve the 3-5 group by 1990 will results in loss of all federal funding at this age level and below!

Both Title I (0-2 year of age) and Title II (3-5 years of age) have implications for administrators and teachers in highly rural areas. Critical issues include the availability of services, shortages of qualified teachers, distances children must be transported to receive services, and agencies which will provide services. This paper will provide information on the basic content of Title I and II of P.L. 99-457 and implications for rural schools in providing services to this population.

TITLE I: SERVICES TO INFANTS AND TODDLERS

Title I of P.L. 99-457 provides a new federal discretionary program to develop a comprehensive state plan for a coordinated, interdisciplinary program of early intervention services for infants and toddlers and their families. The rationale for this new program is the high level of infant competence children can obtain through the effectiveness of early intervention programming.

The statewide, comprehensive program is to be a multidisciplinary effort with interagency cooperation. The program of intervention is to provide services for all handicapped infants and toddlers. The grants are provided to facilitate coordination of payments from various public and private agencies and sources. Most states have agencies other than SEAs coordinate services at the birth through two-year-old age level.

DEFINITIONS

The house report on the amendments define terms relevant to implementation of the law. Each state will define the term "developmental delay". It is expected that the definition for each state will encompass levels of functioning in all five developmental areas listed below (H.R. Report 99-860).

Handicapped Infants and Toddlers. This law specifically defines this group to include individuals from birth to age two inclusive who are experiencing developmental delays in one or more of the following areas:

- cognitive development
- physical development
- language and speech development
- psycho-social development
- self help skills.

The children may also qualify by having a diagnosed physical or mental condition which has a high probability of resulting in developmental delay. In this way, children who don't exhibit delay immediately can be served. (P.L. 99-457).

Early Intervention Services. This term is defined by the law to include seven criteria. Services provided must be:

- under public supervision
- at no cost
- meet developmental needs
- meet the standard of the state

- include but not be limited to:
  - family training
  - counseling
  - home visits
  - speech instruction
  - speech pathology and audiology
  - occupational therapy
  - physical therapy
  - psychological services
  - case management services
  - medical services for diagnostic or evaluation purposes
  - screening and assessment services
  - health services necessary to enable child to benefit from other intervention.
- delivered by qualified personnel
  - special educators
  - speech and language pathologists
  - occupational therapists
  - physical therapists
  - psychologists
  - social workers
  - nurses
  - nutrionalists
  - physicians
- in conformity with an Individual Family Service Plan (IFP).

An important provision of the law allow agencies to initiate services to children and families before the IFP is completely written and finalized. This is due to the tremendous rate at which infants develop during these first three year of life.

THE STATE PLAN

Each state plan must provide very specific information on the establishment of an interagency coordinating council and the identification of a lead agency to coordinate services for the state. The governor of each state will identify the lead agency and appoint the interagency coordinating council.

The plan must include assurances that funds will be used to assist the state to plan, develop, and implement a statewide system of services. It is assumed that the states will use the first three years of this funding to continue the State Planning Incentive Grants that are supplanted by this new program. By the third year, the states must have adopted a policy which incorporates all the elements of the required statewide system listed below. This statewide system must be in effect by the fourth year.

Components of the Statewide System. The required components of the statewide system are listed below. The plan is to include information on:

- a definition for developmental delay to be used by the state,
- the timetable ensuring that appropriate services will be delivered,
- the procedures for multidisciplinary evaluation of child and family need,
- a comprehensive child find and referral system,
- a public awareness program,
- a central directory of services, resources, experts available in the state,
- a comprehensive system of personnel development,
- an established single line of authority in a lead agency,
- a policy pertaining to contracting services from established service providers,
- a procedure for timely reimbursements of funds under this law,
- the policies and procedures used to ensure personnel providing services are appropriately and adequately prepared and trained according to standards of the state.

TITLE II: SERVICES FOR THE THREE - FIVE YEAR-OLDS

By school year 1990-91, all sates that apply for 94-142 funds will need to provide assurance that they are providing a free appropriate public education to all handicapped children ages three through five. States that fail to comply will lose the following sources of funding:

- the new Preschool Grant,
- monies generated under the P.L. 94-142 formula for the 3-5 population served,

- grants and contracts related to preschool special education authorized under the EHA discretionary programs, Parts C through G including:
    - Part C: centers and services to meet special needs,
    - Part D: Training Personnel,
    - Part E: Research in the Education of the Handicapped,
    - Part F: Instructional Media for the Handicapped,
    - Part G: Technology, Education Media and Materials (Dugan, 1986).

Only that portion of funds designated for the birth through five-year-old level would be lost.

PROVISIONS OF TITLE II

States are not required to report children served by disability category. Therefore, children do not have to be labeled categorically.

There are a variety of models for delivery of service that are considered appropriate. These include variations in length of school day and range and variety of preschool programs, including part-day home-based, and part or full-day center-based programs.

The role of the family is stressed in this new legislation. The IEP may include instruction for parents. The committee report on this new law emphasizes that family services play an important role in preschool programming.

The program for 3-5 year olds will be administered through the SEA and LEA. However, SEAs and LEAs may contract services from existing programs and agencies. This will facilitate the supplementing of existing programs for children and not the replacement or supplanting of programs already available.

FUNDING LEVELS

Federal authorization levels provide $300 for each child that was served in the previous academic year of 1986-87, and will provide $3,800 for each new child identified and served in fiscal year 1987-88. Track a funds (amount per child served in previous academic year) escalate as follows:

FY 87	$300 per child
FY 88	$400 per child
FY 89	$500 per child
FY 90	$1,000 per child

Track B, the $3,800 per child to be served in the coming fiscal year beyond the previous years count, ends in FY 1990 when states will receive $1,000 in federal funds for each child served.

Full Service Mandate: By 1990, all states serving children at the 3-5 level must serve all handicapped children in this age group or loose all federal dollars tagged for this population. The full service mandate will be delayed for one year until school year 1990-91 if:

- federal appropriations for this program for FY '87, '88, and '89 do not total $656 million (projected full funding)
- *and* the federal appropriation for FY 90 is less than $306 million ($900 per child).

In-State Flow Through of P.L. 99-457 Dollars: During the FY 1987-88, 5% of the dollars may remain in the SEA for administration and 25% for Discretionary spending. At least 70% of the dollars must flow through to the LEAs and IEUs (Intermediate educational units). in FY 1988 and beyond, 5% may stay in the SEA for Adminstration and 20% for Discretionary spending but 75% must flow through to the LEAs and IEUs.

Part of the money maintained by the SEA may be used to supplant the monies withdrawn from the old State Planning Incentive Grants which will end with when P.L. 99-457 becomes effective. In this way, the activities of the state planning programs may be maintained and/or extended.

IMPLICATIONS FOR RURAL DISTRICTS

This new law will generate a lot of new revenue to serve children at the birth through five-year-old level. The additional amount of $3,800 for each new child identified at the three through five-year-old age level, as well as the escalating amount provided for each child served in the previous year will provide an incentive for finding and serving new children. The negative effect of a decision against providing services is the loss of funds in other federal programs with funding at the below five-year-old level.

ADVANTAGES WITHIN THE NEW LAW

Rural areas may elect to contract services from existing agencies and programs. Each district will not have to develop the physical plant or materials and resources needed to set up classroom for these children. Administrators in many public schools have expressed concern about the appropriateness of having birth through five-year-old children on elementary school campuses. The new law would allow for contracting services from other early childhood programs provided that the programs have the appropriately trained personnel.

Regionalization of services is encouraged by this law. This will allow the opportunity for the funding of IEUs and/or the development of IEUs or regional service centers in rural states where delivery of service to a sparse population over large geographic areas is problematic. Interagency coordination and the contracting of services from existing programs will also facilitate the regionalization of services.

The flexibility of models for delivery of service allowable within the law provides for many options for agencies. Home-based and center based programs along with variations in length of day provide options for districts.

The funds provided under P.L. 99-457 are developed to supplement, not supplant existing programs and services. Each state is asked to provide its own definition of developmentally delayed, allowing flexibility in defining the population of children to be served at the birth ththrough two-year-old level.

WHERE DO WE GO FROM HERE?

Administrators of rural districts should be encouraged to become informed of their state's intentions in terms of this new law. The law is not MANDATED! There are many disadvantages and losses incurred through not implementing Title II services at the three through five-year-old level. But, states are not mandated to serve these children. By 1990, they must either serve all or none. If they identify and serve all, P.L. 99-142 monies at the three through five-year-old level will continue to be available. If all of this age groups are not served, all P.L. 99-142 monies at that age level only, are lost along with that portion of funding of Parts C through G (mentioned above) allocated for the below five-year-old level.

There are powerful incentives for implementation. The disadvantage is that appropriation will be below level funding and states will need to legislate for full implementation of this law and for state appropriation to supplement federal funds and provide for full implementation.

Rural area administrators must strive to seek representation on advisory committees, and especially on the Interagency Coordinating Council appointed by the Governor for the birth through two-year-old initiative. Development of the state plan and definition of "developmental delay" will be key issues. Rural schools and personnel will have to live with what is drafted and instated by state legislatures and councils. Representation will be essential to effective programming for early intervention in rural areas.

REFERENCES

Public Law 99-457 (1986). Education for all handicapped Act Amendments of 1986. (99th Congress, 2nd Session, House of Representative, Report 99-860).

Dugan, S., (1986). Education of the handicapped amendments of 1986. Education of the Handicapped, Special Supplement, November, 1986.

W. N. Skeet Creekmore
Northern Louisiana University
Monroe, LA 71209

PRESENTATION TITLE: SLAUGHTER THE SACRED CALF: AN ALTERNATIVE VOCATIONAL ASSESSMENT AND TRAINING APPROACH

ABSTRACT: Traditional vocational assessment packages and technique has centered around simulations, norm referenced psychological and motor evaluation and leaps-of-faith in interpretation. The field of evaluation and training for vocational success for persons with special needs has developed slowly relying almost totally on the medical model for its assessment procedures. In the 1960's and early 1970's, professionals began focusing on job simulation assessment techniques for the collection of trainee information which gave more accurate 'performance' data to the evaluation teams. During this moment in history, the country was being inundated with sheltered workshop programs. In the South, an average of two new workshops opened their doors per month for a six year period. The logical marriage was between these new vocational assessment efforts created by professionals in the field and the new sites requiring these services. Vocational assessment took on a new posture by adding new information to the case file of the trainees.....simulated 'station' training.

Current literature and thought suggests that these moves, and sophistications made in the last decade were much needed and effective but did not go far enough for the trainee's sake. Current thought is attempting to direct the evaluator and training professionals to the notions of ECOLOGICAL CONGRUENCE. These fancy words in essence suggest a balance between the essential skills necessary to complete a task (job) and the skills possessed by the individual to rise to the occasion. In short, if the environment (job) asks the individual to transport a 25 lb. container of liquid from the storeroom to the dishwashing area in one motion, is the worker physically capable of doing so dependably? If the answer to this simple question is 'yes' then for that task there is homeostasis or a job/worker congruence. The author proposes a procedure through which there is a calculated attempt to ascertain present-level-of-functioning data on a specific trainee in critically related areas, while collecting the same or closely related information from the job site for the expressed purposes of matching the demands of the job with the skills of the possible employee.

Error analysis procedures will be used to identify those areas of weakness of "not yet trained" categories. This procedure allows the staff to identify specific vocational training areas of a functional nature which the trainee lacks or in which he/she shows weaknesses at the present time. Judgments are then made as to the potential success of improving these areas and decisions made relative to specific training which will commence.

The GENERIC VOCATIONAL SKILLS PROFILE designed to evaluate the essential tool components required for the successful completion of specific jobs, and the GENERIC TRAINEE VOCATIONAL SKILLS PROFILE designed to collect functional data of the specific trainee are used to aid in making a vocational match as well as generating areas of training still needed by the trainee. The method provides for dynamic evaluation, is easy to administer, inexpensive and logical. It fits well with the Supported Work Model concept being embraced by the field currently.

Typically, evaluation centers, University affiliated facilities and the like are located in metropolitan areas reducing accessibility to rural areas. The model to be presented requires limited training, is financially economical and is applicable to rural settings. Curricular items are generated from the error analysis negating the necessity for the purchase of costly curricular materials which, in many cases, do not fit the needs of the rural environment.

Presenter: W.N. (Skeet) Creekmore
Professor of Special Education
College of Education
Department of Teacher Education
Northeast Louisiana University
Monroe, LA 71209
Phone (318) 342-2465

James A. Jacobs
University of Wyoming
Laramie, WY 82071

GENERAL CONFERENCE TOPIC: FAMILY -- PROFESSIONAL RELATIONSHIPS

TRAINING PARENTS OF HANDICAPPED STUDENTS: ADJUSTMENT, MANAGEMENT, COMMUNICATION AND LEGAL ISSUES

This four part presentation is based on the author's personal work with parents of handicapped children and adolescents over the past twenty-five years. The majority of the author's experiences were gained when working with parents and staff related directly or indirectly with one or more of the following: Tennessee Re-education Program, Nashville, Tennessee; Rocky Mountain Regional Children's Hospital, Denver, Colorado; the University of Wyoming Diagnostic and Prescriptive Training Clinic, Laramie, Wyoming; and a number of public school programs across the country. The primary emphasis will be to present one method by which professionals, teachers, support personnel and others may work with and train parents of handicapped children and adolescents throughout an entire school year.

The first part of the presentation is designed to assist those working with parents of handicapped children and adolescents to recognize and effectively respond to typical adjustment reaction of these parents. Twelve such reactions will be labeled and discussed with participants. It is strongly felt that before any specific training or programming is begun, each parent or parent set must be assessed relative to this issue. The resulting data will provide those working with parents specific guidelines for the entire training or programming process.

The second major part of the presentation will focus on assisting parents, through direct training, to join professionals in a management partnership designed to control many of the overt behavior problems of handicapped children and adolescents. Thirteen parent training sessions will be suggested. The content of each session will be labeled, briefly discussed, and distributed to each participant. A specific follow-up program and schedule will be offered. This specific training program has been developed and modified over a period of twenty years with feedback from hundreds of parents and professionals. The specific objective is to train parents to the degree that they may function in this vital area without continual dependence on the professional. This is an especially critical issue for practitioners in rural areas.

The added difficulties and complexities of effective communication in families with a handicapped member are profound. The third segment of the presentation is designed to present a program of approximately ten training sessions for the specific purpose of teaching parents to effectively communicate with their families. Methods will be presented that will assist parents in the three primary problem areas of communication. Effective techniques of listening, speaking and problem resolution will be presented.

The presentation will conclude by the author outlining a three session program which has been effectively used to acquaint parents with program and assistance options in the community and public schools. Specifically, these three sessions teach parents (1) how to determine what assistance is available in the community and how to obtain such, (2) the "basics" of public school special education programs including the concepts of: least restrictive educational alternatives, individual educational programs, related services issues, and program procedures, objectives, etc., and (3) the fundamental legal rights and responsibilities of parents, handicapped students and school districts.

TRAINING PARENTS OF HANDICAPPED STUDENTS: ADJUSTMENT, MANAGEMENT, COMMUNICATION AND LEGAL ISSUES

(Abstract of Presentation)
(Fifty Word Description)

This four part presentation is designed to outline for participants one method of working with and training parents of handicapped children and adolescents throughout an entire school year. Specific training will be presented in the areas of 1) Understanding Parental Reactions and Adjustment, 2) Managing Behaviors, 3) Communication, and 4) Legal Issues Involving Public Schools.

Martha G. Sullivan, Ed.D.
Director of Special Education
Howard County Public School System
10910 Route 108
Ellicott City, Maryland 21043

Constance E. Lewis
Supervisor, Special Education
Howard County Public School System
10910 Route 108
Ellicott City, Maryland 21043

Adrienne Lichtinger
Work Study Coordinator
Howard County Public School System
10910 Route 108
Ellicott City, Maryland 21043

Diane Fadely
Work Study Coordinator
Howard County Public School System
10910 Route 108
Ellicott City, Maryland 21043

Elmer Wolter
Work Study Coordinator
Howard County Public School System
10910 Route 108
Ellicott City, Maryland 21043

Effective Work Study Program in a Suburban/Rural County

Overview

The Howard County Public School System, located in Howard County, Maryland, provides a work study program for students who are identified as handicapped and in need of special education services. Howard County is located between Washington, D.C. and Baltimore, Maryland. The demographics of the county reveal both a suburban and rural population. The city of Columbia provides a bedroom community for the Washington, D.C. and Baltimore work force. The rolling hills and farmlands of the western part of the county are rural with farmland carefully protected by the dairy farmers of the area. This diverse population and the unique needs of the areas served by the Howard County Public School System prove to be a challenge.

Program Emphasis

Students who are handicapped and who receive Level 04 (self contained) or Level 05 (special center) programs are eligible for the Work Study Program. The emphasis of the program is to provide work study experience which will enable students to move from the Howard County Public School System into a world of work which includes independent living skills and gainful employment. Experience levels include, (A) in-school instruction in the areas of career awareness, etc., (B) in-school work study placements to include: clerical, custodial, etc., (C) on-the-job placement in short-term and or part-time work study training sites, and (D) long-term supported work placements which are designed to lead to employment following completion of the educational program.

Statistics

Three work study coordinators serve approximately 25 students in active on-thejob placements and 60 in-school placements in levels A, B, C, and D described above.

The 1985 seniors or students "aging out" at age 21 totaled eleven. Ten of these students were employed in June, 1985. Nine were employed October, 1986. The 1986 students leaving the school system totaled 20. Seventeen were employed in June, 1986 and 14 in October, 1986. Currently 20 high school students are on work study sites or training sites.

Employment opportunities include: printroom aide, custodial assistant, mailroom assistant, gas attendant, library aide, cafeteria aide, graphics, food services assistant, packager, shampoo girl, stock clerk, sheltered employment, etc.

Interagency Involvement

The school system is working with the School to Employment Program (STEP). The STEP program is funded through the Howard County Council and is operated by the Howard County Developmental Disability Group, the Howard County Association for Retarded Citizens (HCARC), and the Division of Vocational Rehabilitation (DVR). The program provides on-the-job assistance for students after they leave the school system. The work study coordinators assist STEP by providing referral services. Advocacy services are also provided.

HANDOUT #1

Howard County Public School System
Office of Special Education
Ellicott City, Maryland 21043

WORK STUDY PROGRAM

Who is eligible?

Any student who is currently enrolled in a Level 04 or 05 Special Education program who is not participating in a Howard Vocational-Technical Center program is eligible for Work Study.

Work Study Stages

A. In-class work: behavior, skills, errands, etc.
B. In-school work: custodial, cafeteria, office aide, media aide, etc.
C. Training positions: off campus, nonpaid
D. Competitive employment: elective credits granted

Work Placement Factors

Attendance
Behaviors in and out of school
Parent/guardian support
Academic abilities and performance
Student needs or desires
Abilities
Interests
Job availability
Transportation

Student Goals

To develop the attitude that the individual is a valued person
To develop the self-confidence necessary to take advantage of employment opportunities
To develop job-finding and job-keeping attitudes and skills
To develop the means to complete school
To develop a marketable skill
To be competitively employed prior to graduation

Coordinator Goals

To assist in identifying student strengths and weaknesses in vocational areas
To be a resource person for the classroom teacher in the area of prevocational and vocational skills
To assist in planning classroom activities to enhance vocational skills
To be a liaison between business and industry and the Office of Special Education
To place students in positions to build vocational skills
To have students competitively employed prior to graduation
To enable students to work toward their maximum potential

HANDOUT #2

Howard County Public School System
Office of Special Education
Ellicott City, Maryland 21043

JOB DEVELOPMENT

Training Positions

- Audio Visuals
- Childcare Assistant
- Classroom Aide
- Clerical Trainee
- Custodial Trainee
- Food Service Trainee
- Graphics Arts Assistant
- Grocery/Produce Stock Clerk
- Hospital Materials Tagging Clerk
- Instructional Aide Assistant
- Mailroom Clerk
- Nurse's Aide Assistant
- Printer's Assistant
- Public Library Aide
- Receptionist
- Vehicle Maintainance
- Veterinary Assistant

Competitive Employment

- Baker's Assistant
- Bus Aide
- Busboy
- Cafeteria Worker
- Clerical Worker
- Cook
- Custodian
- Dishwasher
- Electronic Repair Worker
- Fast Food Worker
- Floral Design Assistant
- Greenhouse Assemblyman
- Groundskeeper
- Auto Center Lotman
- Mailroom Clerk
- Packaging Clerk
- Service Station Attendent
- Stock Clerk
- Warehouse Worker

HANDOUT #3
Page 1

HOWARD COUNTY PUBLIC SCHOOL SYSTEM
OFFICE OF SPECIAL EDUCATION
ELLICOTT CITY, MARYLAND 21043

ADMISSION, REVIEW, AND DISMISSAL COMMITTEE REPORT

WORK-STUDY ADAPTIVE BEHAIVOR CHECKLIST

Student's Name ______________________________ Student Number _ _ _ _ _ _ _ _ _ _
Last First

This summary shall be completed by high school Level 04 teachers and Level B work supervisors for students who have been referred by the Admission, Review, and Dismissal (ARD) Committee for consideration of Level C Work Study Placement. This form must be completed in its entirety.

The Teacher/Work Study Supervisor shall rate the student according to his/her mastery of each item. The behavior/performance level that best describes the student's current functioning shall be checked. Comments to further describe areas of proficiency/deficiency are required..

Work Site Observation

Date ____________________ Observed by ______________________________
Signature and Title

Date of Admission, Review, and Dismissal Committee meeting ______________________________

ADAPTIVE BEHAVIOR CHECKLIST

WORK STUDY PROGRAM

Student Evaluation - Level A

Accuracy of Work:
Quality of classroom work/assignments
_____ 1. Careless
_____ 2. Error prone
_____ 3. Usually accurate
_____ 4. Careful
_____ 5. Consistently accurate

Care of Work Area:
Maintains desk area and materials
_____ 1. Very untidy
_____ 2. Sometimes untidy
_____ 3. Fairly neat
_____ 4. Clean and orderly
_____ 5. Very clean and orderly

Use of Materials and Equipment:
Proper use of classroom materials
_____ 1. Careless
_____ 2. Sometimes careless
_____ 3. Adequate
_____ 4. Careful
_____ 5. Very Careful

Speed in Performing Duties:
Completes classrom assignments on time
_____ 1. Very slow
_____ 2. Slow
_____ 3. Adequate
_____ 4. Fast
_____ 5. Exceptionally fast

Use of Work Time:
Attends to tasks in the classroom
_____ 1. Always inefficient
_____ 2. Frequently inefficient
_____ 3. Fair use of time
_____ 4. Efficient
_____ 5. Very efficient and effective

Job Learning and Applications:
Uses skills "across" classes

_____ 1. No skill development
_____ 2. Little skill development
_____ 3. Adequate skill development
_____ 4. Good skill development
_____ 5. Excellent skill development

Responsibility:
Completes assignments without prompting
_____ 1. Avoids responsibility
_____ 2. Sometimes avoids responsibility
_____ 3. Accepts responsibility
_____ 4. Seeks responsibility
_____ 5. Eager for responsibility

Initiative:
Moves from task to task without prompting
_____ 1. Very low motivation
_____ 2. Low motivation
_____ 3. Average motivation
_____ 4. Self-motivated
_____ 5. Highly motivated

Attendance:
Comes to school/class independently
_____ 1. High absenteeism/lateness
_____ 2. Above average absenteeism
_____ 3. Average absenteeism
_____ 4. Seldom absent/late
_____ 5. Never absent or late

Attitude Toward Peers:
Interacts appropriately with peers
_____ 1. Unsatisfactory
_____ 2. Below average
_____ 3. Satisfactory
_____ 4. Better than average
_____ 5. Excellent

Attitude Toward Teacher:
Accepts direction/criticism
_____ 1. Disrespectful/uncooperative
_____ 2. Low respect/cooperation
_____ 3. Average respect/cooperation
_____ 4. Better than average
_____ 5. Very respectful/cooperative

Personal Appearance:
Maintains hygiene/dress appropriate for classroom
_____ 1. Very untidy
_____ 2. Untidy
_____ 3. Tidy
_____ 4. Neater than average
_____ 5. Exceptionally well groomed

Comments ____

____

Teacher Signature	School	Date

Student Signature ____________________________________

ADAPTIVE BEHAVIOR CHECKLIST

WORK STUDY PROGRAM

Student Evaluation - Level B

Accuracy of Work:
Quality of assigned task
_____ 1. Careless
_____ 2. Error prone
_____ 3. Usually acurate
_____ 4. Careful
_____ 5. Consistently accurate

Care of Work Area:
Returns equipment to specific/proper place
_____ 1. Very untidy
_____ 2. Sometimes untidy
_____ 3. Fairly neat
_____ 4. Clean and orderly
_____ 5. Very clean and orderly

Use of Materials and Equipment:
Demonstrates proper use of materials and equipment
_____ 1. Careless
_____ 2. Sometimes careless
_____ 3. Adequate
_____ 4. Careful
_____ 5. Very careful

Speed in Performing Duties:
Completes assigned job within specified time
_____ 1. Very slow
_____ 2. Slow
_____ 3. Adequate
_____ 4. Fast
_____ 5. Exceptionally fast

Use of Work Time:
Remains on task
_____ 1. Always inefficient
_____ 2. Frequently inefficient
_____ 3. Fair use of time
_____ 4. Efficient
_____ 5. Very efficient and effective

Job Learning and Applications:
Transfers skills
_____ 1. No skill development
_____ 2. Little skill development
_____ 3. Adequate skill development
_____ 4. Good skill development
_____ 5. Excellent skill development

Responsibility:
Completes assigned task
_____ 1. Avoids responsibility
_____ 2. Sometimes avoids responsibility
_____ 3. Accepts responsibility
_____ 4. Seeks responsibility
_____ 5. Eager for responsibility

Initiative:
Moves from job to job without prompting
_____ 1. Very low motivation
_____ 2. Low motivation
_____ 3. Average motivation
_____ 4. Self-motivated
_____ 5. Highly motivated

Attendance:
Comes to worksite independently
_____ 1. High absenteeism/lateness
_____ 2. Above average absenteeism
_____ 3. Average absenteeism
_____ 4. Seldom absent/late
_____ 5. Never absent or late

Attitude Toward Co-Workers:
Interacts appropriately with co-workers
_____ 1. Unsatisfactory
_____ 2. Below average
_____ 3. Satisfactory
_____ 4. Better than average
_____ 5. Excellent

Attitude Toward Supervisors:
Accepts direction/criticsm
_____ 1. Disrespectful/uncooperative
_____ 2. Low respect/cooperation
_____ 3. Average respect/cooperation
_____ 4. Better than average
_____ 5. Very respectful/cooperative

Personal Appearance:
Maintains hygiene/dress appropriate for work site
_____ 1. Very untidy
_____ 2. Untidy
_____ 3. Tidy
_____ 4. Neater than average
_____ 5. Exceptionally well groomed

Comments ____

____

Supervisor's Signature ______________ School ______________ Date ______________

Student Signature ______________________________

HANDOUT #4

WORK STUDY PROGRAM

STUDENT EVALUATION

Cooperating Business ______________________________ Trainee ____________________

Please place a check beside the number that best describes the trainee's behavior/performance.

ACCURACY OF WORK

- ______ 1. Careless
- ______ 2. Error prone
- ______ 3. Usually accurate
- ______ 4. Careful
- ______ 5. Consistently accurate

CARE OF WORK AREA

- ______ 1. Very untidy
- ______ 2. Sometimes untidy
- ______ 3. Fairly neat
- ______ 4. Clean and orderly
- ______ 5. Very clean and orderly

USE OF MATERIALS AND EQUIPMENT

- ______ 1. Careless
- ______ 2. Sometimes careless
- ______ 3. Adequate
- ______ 4. Careful
- ______ 5. Very careful

SPEED IN PERFORMING DUTIES

- ______ 1. Very slow
- ______ 2. Slow
- ______ 3. Adequate
- ______ 4. Fast
- ______ 5. Exceptionally fast

USE OF WORK TIME

- ______ 1. Always inefficient
- ______ 2. Frequently inefficient
- ______ 3. Fair use of time
- ______ 4. Efficient
- ______ 5. Very efficient and effective

JOB LEARNING AND APPLICATION

- ______ 1. No skill development
- ______ 2. Little skill development
- ______ 3. Adequate skill development
- ______ 4. Good skill development
- ______ 5. Excellent skill development

RESPONSIBILITY

- ______ 1. Avoids responsibility
- ______ 2. Sometimes avoids responsibility
- ______ 3. Accepts responsibility
- ______ 4. Seeks responsibility
- ______ 5. Eager for responsibility

INITIATIVE

- ______ 1. Very low motivation
- ______ 2. Low motivation
- ______ 3. Average motivation
- ______ 4. Self-motivated
- ______ 5. Highly motivated

ATTENDANCE

- ______ 1. High absenteeism/lateness
- ______ 2. Above average absenteeism
- ______ 3. Average absenteeism
- ______ 4. Seldom absent/late
- ______ 5. Never absent or late

ATTITUDE TOWARD CO-WORKERS

- ______ 1. Unsatisfactory
- ______ 2. Below average
- ______ 3. Satisfactory
- ______ 4. Better than average
- ______ 5. Excellent

ATTITUDE TOWARD SUPERIORS

- ______ 1. Disrespectful/uncooperative
- ______ 2. Low respect/cooperation
- ______ 3. Average respect/cooperation
- ______ 4. Better than average
- ______ 5. Very respectful/cooperative

PERSONAL APPEARANCE

- ______ 1. Very untidy
- ______ 2. Untidy
- ______ 3. Tidy
- ______ 4. Neater than average
- ______ 5. Exceptionally well groomed

ADDITIONAL COMMENTS ____

____

SIGNATURE OF EVALUATOR ______________________________ **DATE** ____________________

Howard County Public School System
Office of Special Education
2/87

Making the transition from school to employment and a complex system of community services can be overwhelming for disabled students and their families.

Transitioning provides a bridge between the structure of school and the opportunities and challenges of adult life.

Transitioning is a process which plans and prepares a handicapped student for the future:

- vocational training
- employment
- housing
- leisure activities
- health care
- living skills
- financial security

Transitioning includes the period of time from high school, graduation, post-secondary education or adult services and through initial years of employment.

Planning for transition is the shared responsibility of students, parents/guardians, special educators, community service providers and, when possible, employers.

TRANSITION SERVICES

Transition services may be viewed in terms of kinds of services (housing, employment, etc.) and levels of services (time-limited or ongoing).

Transition services may range from short term training to long term follow-up based upon the student's needs and abilities.

Appropriate levels of transition service are based upon the concept of the least restrictive environment.

Transition services are planned to take into account the availability of services and employment opportunities within the community.

1. Howard County Department of Social Services
2. Howard County Department of Vocational Rehabilitation
3. Howard County Department of Health and Mental Hygiene
4. Howard County Association for Retarded Citizens
5. Howard County Association for Children with Learning Disabilities
6. United Cerebral Palsy
7. Howard Community College

HOW TO BEGIN

Parents and guardians need to prepare for their young adult's transitioning. The following guidelines are steps to start the process:

1. Listen and clarify your young adult's goals for him/herself. Help him/her assess strengths, interests and aspirations.
2. Match your young adult's goals with your expectations. Take into account the degree of the disability and family circumstances.
3. Begin formulating a transition plan two years before the student exits the school system.
4. Educate yourself about services in the community.
5. Get information through resources listed on this brochure.
6. Apply early to those services with long waiting lists.
7. Remember that the transitioning from school to work is a difficult adjustment for all students, with or without a disability.

INTERAGENCY COMMITTEE for TRANSITIONING [illegible]

This brochure was prepared by the Interagency Committee for students who are transitioning from the public school system or aging out. The committee includes representatives from:

1. Howard County Department of Education
2. Howard County Association for Children With Learning Disabilities
3. Howard County Health Department
4. Disabilities Issues Advisory Committee
5. Howard County Division of Vocational Rehabilitation
6. Howard County Department of Social Services
7. Howard County Division of Juvenile Services
8. United Cerebral Palsy
9. Parents of Emotionally Handicapped Students
10. Howard County Association for Retarded Citizens
11. Howard County Community College

Michael J. Bina, Ed.D.
11447 Morning Glory Trail
Austin, TX 78756

Meeting the Needs of the Rural Area Teacher of the Visually Handicapped

> WANTED
> Itinerant Teacher for the Visually Impaired
>
> Progressive rural district distant miles from the heartbeat of urban life is looking for a jack of all trades, modeled in the Annie Sullivan tradition, who has late model low mile per gallon car. Candidate must be able to read road maps, change tires and fix breakdowns, drive, and do so, in some cases, on roads not yet on maps. Applicant must be able to juggle, work with students with multiple handicaps in the morning and with the class valedictorian in the afternoon. Some experience with visually handicapped desirable, but not necessary.

The author of the preceding job vacany want ad, probably the person who vacated the position, clearly knew the realities of the job. For many, if not most of the newly employed first year itinerant teachers of the visually handicapped, the realities are not clearly formed until time has been spent on the job. Within a few weeks on the job, the realities hit home and hard evidence exists to add credence to the ancedotes and verbal descriptions presented in their teacher training programs. Newly employed itinerant teachers have a similiar reaction to what first time parachutists have when completing their first jump. The neophyte parachutist exclaims, "Now I know what my ground instructor was trying to tell me. I had no idea what the words really meant. You have to actually experience it to believe it."

Information was solicited from rural area teachers of the visually handicapped in Texas for the purpose of identifying the realities and strategies to improve rural area service delivery for the students, families, and practitioner.

Judging from the fresh, insightful, creative, and amusing responses, the respondents had a very apparent, necessary, and much needed ability to 1) adjust to change, 2) put things in perspective, 3) modify their expectations, and 4) laugh. The frequency which the respondents used humor to describe their jobs was unexpected. Not only did their responses clearly expand and enhance the stereotypical and traditional concepts of working in rural areas, it also pointed out that perhaps one of the most effective coping strategies to employ is the exercise of a healthy sense of humor. That is, being able to laugh at yourself in spite of finding yourself in some very unpleasant and unusual situations and predicaments.

THE REALITIES OF RURAL SERVICE DELIVERY

Even in large population centers the problems associated with trying to marshall resourses, plan and implement programs for blind and visually impaired students is most difficult due to the factors associated with low incidence handicapping conditions. The problems are geometrically complicated whenever services are attempted to be delivered in sparsely populated areas. The reality is that there are too many miles between students and too few students to justify full comprehensive programming such as is possible in denser populated areas. To meet the needs of the students, the teachers bear the brunt of the realites of the inherent drawbacks. They are expected to drive the many miles from one student to the next and to wear the many hats of teacher, counselor, and coordinator in attempting to provide everything that a student needs, but for which there isn't enough time available.

With any job there are drawbacks, negatives, and shortcomings. While rural area service providers listed such characteristics with apparent ease and little reservations, they were quick to point out the benefits, advantages, and positives. The teachers were asked to complete the sentence beginning with "Being an itinerant is..."

Nearly all the respondents mentioned the many miles driven daily. One teacher indicated that she knew the inside of her car probably better than her spouse or own children! Driving 500 miles a week alone, one itinerant pointed out the lack of intellectual stimulation which causes "brain death and gleteus maximus moribundus", but that on the other hand, "at least I can curse in private!" One teacher apparently accepted the driving reality as almost "a John the Baptist job where you have plenty of opportunity to cry in the wilderness."

Staying in an automobile for long stretches, not only can be frustrating, said one itinerant, but that on "Some days I arrived at my destination so totally zonked that I could not remember why I came!" She continued, "Leaving home at 6:30 a.m. for an hour and one half drive to see a student you'll only get to see an hour. You get there and he's taking a test! You arrive back at your base at 10:30 and you ask yourself, 'What have I accomplished?'" Expressing a similiar feeling, another teacher wrote, "Receiving a college degree, starting to teach, and thinking that you might need remedial help yourself. You show up at the wrong school because what you thought was Monday was really Tuesday!"

The most frustrating reality reported were those anecdotes associated with breakdowns or those experiences which are characterized by flat tires, grass stained slacks, bleeding knuckles, and filthy hands. Getting hopelessly stuck, one stalled initinerant admitted that she cursed, cryed, and walked three miles in pouring rain to a remote farm house to call her Daddy! Most respondents reported having to fix a flat tire, but that for one, it took longer gettting all the toys, boxes, and junk out of her trunk to get to the spare than it did to fix the flat. Needing not only jump starts for her car, one itinerant joked that occasionally she needed one for herself!

Getting from school to school was complicated many times apparently by unusual directions given by local residents. One example is "Drive down the road 'til you get of the electricity poles, go over a hill near two gigantic towers." Following these directions one teacher ended up in Oklahoma because the hill she was instructed to look for was a bump in the road and the gigantic towers were two grain silos! Stopping at the Dairy Queen drive-through for directions, one practitioner, who had a back seat full of instructional toys, was asked what type of toys she was selling.

The expectations of others was listed frequently as a source of frustration.

One teacher remarked that attempting to do all that you are expected to do and then being simultaneously expected to keep a positive attitude was a real challenge. Being expected to wear so many hats, one teacher felt she was spread very thin; however, every time she stepped on the scale she regretfuly reported that she didn't seem to lose any weight! Giving a test in Biology one period, on the Odyssey the next, and then hurrying to record a chapter in Economics---all in the Principals outer office---was listed as a very difficult expectation. The reality of having different forms, textbooks, school holidays, procedures, and different expectations to "dance to" in three totally different districts was listed as a prime stress producer! Also listed were having a community with a poor attitudes about education, not having the latest technological equipment, having too many students and associated scheduling woes, having a supervisor who "doesn't know beans about blindness", and having regular educators who act like they are being punished when having to work with VH students.

Communication with school personnel was reported as an factor which was very important. Calling the school to make sure that his student, who had been ill the day before, was actually there, one practitioner was informed that the student was not ill and in school. When he arrived at the school after an hour drive he found out that the student went home ill after he had started driving. One itinerant received a distress call from a frantic diagnostician miles away concerned that a "blind" student just arrived in the district and that no one knew what to do. Arriving in the district she discovered the student had 20/200 acuities. She explained that she calmly assured the diagnostician that the student (and she) would survive---but she wondered if she would.

Having to function at the mercy of others to carry out plans and getting students to appointments and then having to "educate" a new batch of teachers every year due to frequent turnover were commonly mentioned frustations. Reported as even worse than frequent turn-over were the uncooperative peers or administrator who didn't turn-over fast enough! Regular educators' lack of knowledge about handicaps and how to adapt instruction was a reality many listed as one factor they would like to change. Having to plead with teachers to let students out a given time, getting no respect and support, and being viewed as an "invader" occasionally created a very stressful and negative environment. One teacher commented, "Can you imagine never fully meeting the expectations of the regular educators who have no idea what you are supposed to do, who you are, where you came from---even after giving them your card, having an hour conference with them, and working with students in the classroom for two years?"

The itinerants stressed that their training program didn't provide them with a clear picture of what the realities of rural area service delivery were. She reported, "Not only didn't my training program inform me about stubborn administrators who refuse to change or about the one home I visited which had flee infested carpets, cat liter boxes six feet from where I worked with the student, or the family dogs who charge you while family members try to assure you, 'They won't bite! They won't bite---I hope!"

Other factors listed as frustrating realities were having to work out of broom closets, regretting that "I didn't buy stock in Goodyear, McDonalds, and Texaco when I first took the job", getting only three thank you notes in three years, having difficulty finding a clean restroom, and, as one practitioner summarized, "Performing in a three ring circus, in contact with no one, running from one ring to another, balancing yourself, juggling many responsibilities, and holding on tightly as you swing to and fro just trying to hang in there!"

ADVANTAGES AND BENEFITS OF RURAL AREA SERVICE DELIVERY

The respondents felt that smaller towns and schools were associated with more cooperation and concern for the child such as may be the case in larger school systems. Associated with this, they listed quality parent interactions, students being able to live at home, a healthy attitude that "the student is one of ours and we'll meet his needs the very best we can", and lots of "tender loving care from the bus drivers all the way down to the Superintendent."

Admitting that infrequent services were a big problem they indicated that infrequent services were better than no services at all. The teachers responded that the beautiful scenery and not having anyone to constantly look over their shoulders were positives. While one respondent facetiously answered, "Advantages? Are their any?", another conversely stated, "I have many advantages with my job. I work with super people who are knowledgeable, intelligent, and supportive. This is near to an ideal situation as I could find".

While many of the teachers admitted that they didn't know how they were doing, due to infrequent supervision and no colleagues to consult with, many indicated that they had come to trust in their abilities and efforts and were confident that they were doing the very best they could.

Another teacher indicated that while she missed having close contact with colleagues, she felt, on the other hand, that not having to spend time in the typical teachers' lounge was an asset and didn't miss the standard lounge gossip!

STRATEGIES AND SUGGESTIONS FOR OVERCOMING JOB SHORTCOMINGS

The rural area service providers offered many ideas to improve their efficiency, effectiveness, and morale. These ideas and suggestions are listed under the following categories:

A. Improving efficiency by better organization and preparation

B. Establishing team relationship with school personnel

C. Involving parents in service delivery

D. Encouraging the student to assume more responsibility

E. Marshalling resources to enhance program comprehensiveness, and

F. Adapting attitudes and expections

Improving Efficiency by Better Organization and Preparation

The necessity to thoroughly plan but yet remain flexible, to set realistic priorities, and to anticipate the unexpected by carrying everything for up to three lessons was highly recommended. Setting priorities was especially emphasized since everything can't be accomplished that is needed especially when there is limited contact with students. Getting others such as parents, supervisors, the students and other teachers to realize this may be a challenge.

Carrying a box for each student and learning to organize and work out of a car is imperative. One teacher recommended carrying a bag of activities for the other children in the family when doing home visits. This way the other children won't be left out and will busy themselves with their toy and won't interrupt her time with the student.

Suggestions such as updating your phone and address lists of students, parents, school personnel, and other resources were made. Also preparing for the inevitability that someday the keys would be locked in the car, one person recommended hiding an extra key on the inside of the car or predetermining which window is the cheapist to replace!

Making form letters for introducing the student to the teachers, assessing the teacher's special media needs, and holiday greetings are a few of the occasions which will save time, assist in better organization, and improve communication with staff. Also getting business cards will make communication more convient. Creative cards, with a catchy caption and humorous graphic, may be a source of discussion which will facilitate team building. Developing a set of hand-outs for teachers on visual conditions, learning styles, adapting instruction, modifying expectations, and other needs will save time in answering questions and will allow the teachers, who usually don't have time when the specialist is there to discuss critically important information. More time and frustration may be saved by organizing a system of notification when students are ill, what is needed in advance, and being alerted ahead of time to prevent major problems from developing.

Teachers need to gain additional competencies and skills to work with VH students with multiple handicaps who are increasing in number on teacher caseloads. Many teachers trained in traditional programs have not had instruction and experiences in meeting the needs of these students (Koehler, 1986)

Increasing the consultive role (Huebner, 1985) will allow more time to assess, instruct, and perform other priority components of the itinerant job. Teachers who have not had training in this model should arrange inservice training for themselves to function more effectively within the teacher and parent consultant role. Huebner stressed that such training be given heightened emphasis in pre-service training programs.

Establishing Team Relationships with School Personnel

Being professional as possible with regular education colleagues will help in developing a good working relationship with those who come in direct daily contact with the students. Once a solid understanding is established, the regular educator team player will be better able to adapt and meet the student's needs independently whenever problems arise.

With quality staff development opportunities for regular educators improved services can be expected. Morever, the probability of better acceptance of the visually handicapped student is heightened. Also, as regular educators become more knowledgable and better able to meet the needs of the student, this will allow VH teachers to function more in a consultant model.

Hand picking regular education colleagues who can provide support and adapt for the students is very important. Certain individual teacher's attitudes, their unwillingness to adapt, their non-acceptance of handicapped students, and their uncooperative nature will never change. Efforts need to be realistically directed toward team building with professionals who have good common sense, who are flexible, who are prepared enough to provide those materials and assignments with which they would need help at least a week in advance, and those who can and will be supportive. This realistic strategy will not only save frustrations, it will assure that the student is placed in a positive learning climate. Investing time on a placement of a student with a reluctant, unaccepting educator in such a negative atmosphere will not pay dividends or be productive for the specialist and particularly for the students.

Developing realistic expectations among teachers and others what visually handicapped children can and can't do and having others moderate the extremes of not expecting too much or too little is worthy of attention. The respondents suggested praising and positively reinforcing the teacher and other staff and pointed out that the teachers probably get as much positive feedback as itinerant teachers! Deserved, judicious praise and recognition from the itinerant teacher and the student, and engaging the teacher in conversation on a personal level will do much to reinforce team bonds and promote acceptance and success of the student. Even extremely busy people can find time to discuss themselves, their families, or their problems. Showing sensitivity to the person may open the doors for the student.

Involving Parents in Service Delivery

"Educating" parents to be not overly demanding or caring and assisting them to realistically adjust their expectations on what they can and cannot, and should and should not do for their child is critical. Parents likewise may need assistance with developing a system of remembering medical and other appointments and with becoming advocates for themselves and their children. The teacher's role in advocacy should decrease with time as parents and students assume more responsibility in IEP development, placment, and other decisions.

Listening to parents is very critical. Obtaining parental feedback through an end of the year evaluation form may provide valuable information. Parents should be approached on a personal, affective level rather than the aloof, clinical, superior professional level. Involving parents as equal partners and convincing them that there are strength in numbers in advocacy, fellow support of parents, and in promoting service improvements is important.

Assisting the parents to be realistic about the school's role and what they can and can't do is very necessary. Siding with the parents and blaming the system for problems which really can't be solved accomplishes nothing positive. This widens the trust gap in the parent's eyes and further skews the parent's view of the school. Both the parents and the school system have the same goal regarding education. If the system is making strong efforts and is really doing the best it can under the circumstances, the teacher should accentuate the positive aspects to the parents. Districts may actually respond more favorably to requests for expanded, improved services which are stated positively than by aggressive, unrealistic demands. Parents should be encouraged to support and advocate for early childhood intevention programs. These programs are a key to VH student success. Early development of compensatory skills will provide for a solid foundation of future learning. Basic skills need to be taught and reinforced when the student is ready for such growth. Without properly timed intervention the delayed student never can be expected to catch up. Time spent on remediating a deficit further widens the achievement gap since the student's peers are being introduced to new material and are gaining new skills.

Encouraging the Student to Assume More Responsibility

Teachers recommended that parents and teachers encourage students to become more organized, responsible for assingments and appointments, and less dependent on them for help, reminders, and prompts. They also recommended encouraging students to become more assertive, make their own decisions, and assume the responsibility to meet their own needs in the regular classroom. Whenever they do meet their own needs, they will feel accomplishment and pride in their self-advocacy and self-initiated efforts. Developing independent study, effective note taking skills, and information solicitation skills will reduce unnecessary reliance on the teacher and other students.

Independence can be further developed by encouraging interdependent cooperative relationships such as sighted peers recording black board notes and the VH student utilizing his auditory strengths to take notes during a lecture. Most importantly, students should be encouraged to express appreciation to those who assist them. Through such efforts, the students will learn, that they will be better accepted by their peers and teachers.

Marshalling Resources to Enhance Program Comprehensiveness

Enrolling students in summer enrichment, compensatory, or tutorial skill programs at camps or in LEA or residential school summer programs to meet those needs for which there is not enough time to focus on during the year is recommended. Another suggestion is exploring placements in residential schools during the school year to enhance compensatory skill development. With better basic skills, students can accept more responsibility, do more things for themselves, rely less on the teachers, and in general be more successful. Promoting a well oiled revolving door in residential schools for short term placements will greatly assist in student success. The teachers further suggested learning more about service delivery options such as regular residential programs, services available in neighboring districts, intermediate education agencies, special education cooperatives, residential school outreach services, and other arrangements for direct and indirect service provisions.

Establishing good working relationships with university, rehabilitation centers, residential and public school staff can assist the itinerant. Utilizing the others' expertise and resources whenever possible on high technology and other aides, adaptations in content and skill areas, low vision, vocational, adaptive physical education, assessment, and vocational adaptations can directly benefit the students. Telephone toll free "hotlines" sponsored through residential schools, university training programs, or state education agencies could support rural service providers who have questions but no one to turn to locally for advise.

Participating in networks and coalitions with professionals in related disciplines are very valuable in coordinating services, in preventing duplication, and in interdisciplinary group and problem solving. Developing a resource list of people, agencies, and volunteers in your area, and then sharing this information with others will improve coordination of services.

Establishing telephone, newsletter, and regular meeting networks with co-workers are excellent opportunities for the isolated itinerant. In some locales O & M instructors, physical and occupational theraptists, itinerant vh teachers and other low incidence specialists can support each other and share experiences, problems, and solutions in these peer networks. The participants at these monthly meetings can rotate responsibilities such as program and refreshments. Supervisors should be asked if these meetings can qualify for inservice training.

Perhaps one of the best supports that a professional has is membership in professional organizations such a Council for Exceptional Children, Division for Visually Handicapped; and Association for Education and Rehabilitation for Blind and Visually Impaired. These organizations can support the rural professional by involving them within a larger support membership, provide interest group activities, and entitles the members to publications. Parent groups such as PTA's or those affliated with the National Association of Parents of Visually Impaired can be a source of support, advocacy, and volunteers.

The itinerant along with their supervisor may be able to increase vocational opportunities for the students by exploring the provisions of the Job Training Partnership Act. One teacher recommended determining numbers, ages, and functioning levels of vh students in and outside the district up to a 100 mile radius. Based on this survey, other program options could be explored such as a cooperative regional VH resource or self-contained program. A centralized program based on student needs would provide more comprehensive and better targeted services. Submitting a proposal for an aide showing cost and service delivery efficiency may be in order especially if the aide is needed to provide critically needed reinforcement and to relieve the itinerant of routine tasks.

Huebner (1985) recommended proposing new and innovative service delivery options between neighborhood districts. She stated, "School district boundaries, county lines, and in some cases, state lines must be traversed in order to collaborate and provide the best possible and most cost effective service."

University training programs should be encouraged to provide decentralized off-campus outreach coursework. Having the class taught in the rural area will clearly impress on the instructor's mind the detailed unique and realistic needs of teaching in such an area. Since most rural area service providers could not attend university classes on campus, having the classes taught as an outreach function of the university allows staff growth which might otherwise be impractical. An isolated itinerant should explore obtaining another certification in O & M, VH, or multi-handicapped to enhance professional skills. Universities may become more and more interested in such dual or multi-competency programs as enrollments drop and the teacher shortage increases.

The itinerant in the field may assist the universities and the districts facing a critical teacher shortage by efforts to recruit and retain special educators in rural areas. This may be accomplished by posting job annoucements at conferences, speaking to teacher preparation classes about rural area employment, and supporting colleagues who are considering leaving teaching or moving.

Adapting Attitudes and Expectations

Consistent feelings are critically important in being a role model for students. Getting feelings consistent is difficult in light of the ever changing job responsibilities and realities. One itinerant responded, "It's tough. Somedays I feel that I'm on target and on other I feel like going home and pulling the covers over my head. Somedays I'm not sure that I have adjusted." Being flexible, learning to pace yourself, meeting schedules, adjusting to other personalities, not overreacting, and not panicing are important. As one teacher optimistically stated, "Hang in there. Things will get better. Tomorrow will come and you will survive. If its 40 degrees below zero at 9:00 am---who knows, it may warm up to 25 below!

One practitioner recommended that since you can't change teachers or their attitudes or situations, the itinerant needs to adjust to the realities. He stated,

> They can only do that themselves. You can only provide them with information. Accept that you cannot force them to follow through on recommendations. Rural districts do things differently, some times better, sometimes worse. Don't push teachers. Try to pull them toward what you think would help the child. Try to understand their viewpoint and their situation. Relax. Things go slower in a rural area. Leave for appointments with plenty of time. Don't speed. Better to call the school and tell them you'll be arriving late.

Applying the adage "When in Rome do as the Romans do" is necessary. If the country and rural area valves, style, and pace differ from the practitioner's preferences, and he communicates this directly or indirectly this is bound to affect his success and effectiveness with family members, school staff, and the students. Huebner recommends that professionals "Need to acknowledge cultural nuances and develop sensitivity to ethic and religious beliefs practiced in rural communities."

Expecting that people in rural areas should change or become more sophisticated is unrealistic and unkind. As Tucker (1985) indicated,

> Rural dwellers are usually in their communities by choice and often have a very strong love and understanding of their surroundings. They respect their environment, rejoice in it, work in it, and have very individualized impressions of their areas. It should be our basic function as teachers to understand these impressions.

The respondents recommended various diversions and compensations for having to drive long distances. Such things as developing a cassette book and album library and packing creative lunches for the lunches breaks they don't get and usually must take in the car while driving. Walking, running, exercising, and reflecting to stay sane and healthy were mentioned as being useful. One teacher replied, "The fact that I'm helping others, keeps me going. Reflect on yourself, your life, your role as a teacher. Keep things in perspective."

Cultivating a sense of humor was mentioned frequently. One itinerant applying this suggestion advised, "Take an itinerant job if you have one year to live and you wish to atone for the sins of mankind!" Another teacher suggested publishing your ideas and sharing them with others. She suggested writing an article on how to change a tire without cursing or writing a book entitled How to Be a Jack and Master of All Trades---Mission Impossible! In this book she indicated that she would share the secret of how to teach a full 60 minute lesson in 25.

Besides getting a dependable car, the itinerants suggested a car phone, a blow up companion, starting a support group called "Itinerants Anonymous" in which you survive one day at a time, walking swiftly and carrying a big bag, and developing a positive self-imagine even though no one knows who you are or what you are supposed to be doing. As one teacher advised, "Develop good relationships in your role of social worker, interpretor, appointment maker, counselor, listener, friend, and---"O, yes! Teacher!"

GENERALIZATIONS ABOUT RURAL AREA SERVICE DELIVERY

Human nature is such that people have preconceived ideas about things and hold and preserve these assumptions as truths. Such ideas are formed in most instances without a solid and wide information base and are passed on and accepted by others without question. There are such ideas or myths associated with rural area service delivery. Such myths should be looked at closely because of the effect they have on the professional.

In a study of the morale of teachers of the visually handicapped in a nine state region, it was hypothesized that itinerant teachers would have lowered morale, and therefore greater potential for attrition than VH teachers in other service delivery options (Bina, 1980). This was hypothesized because itinerant staff are required to spend significant amounts of time driving rather than having that time for direct student contact. Also, itinerant teachers may feel a sense of isolation in not having an opportunity to share common problems, solutions, and personal feelings (Renshaw, 1976). Surprisingly, no significant differences were found between service delivery options with respect to morale scores. The assumption that itinerant teachers have low morale scores, and greater potential for attrition due to the unique factors associated with their job has had widespread, and often times unquestioned acceptance. Based on this 1980 study this assumption should be seriously questioned. Itinerants have factors which lower their morale yet, according to the study, there are unique factors which raise their over-all morale score to be very similiar to their counterparts in other VH jobs. While there were itinerants in the Low Morale Group who indicated a high potential for attrition, there were an equal number of itinerants in the High Morale Group who indicated a low potential for attrition.

That rural area teachers have lower morale is another commonly held assumption which was not supported in the 1980 study. Rural teachers were found to be more satisfied than teachers in urban areas. Additionally, teachers who grew up in a rural area have higher morale than those raised in urban settings. Teachers in very rural and very urban communities, however displayed lower morale scores.

One itinerant admitted that she had misconceptions about other service delivery options. She indicated that she recently toured a residential school and was very surprised at the comprehensive, quality offerings and the apparent progressive changes programatically since her last visit to the school 15 years previously. She admitted,

> Had I known that they had such a good program I could have encouraged some of my students, who so desperately needed much more than I was able to provide, to attend there. When I was there 15 years ago, I formed a preconception, I guess, which was aided by the training programs and their debates they generated over which service delivery option was best. I guess I saw such schools as placements of last resort, restrictive and institutional. I certainly see things differently in retrospect.

The preceding illustrates that students and their families lose out on opportunities when attitudes, myths, and opinions enter in placement considerations. While no one service delivery option is best and all have some drawbacks, clinging to unfounded and invalid conceptions actually results in missed opportunities for students. Debate over which service delivery option is best in most cases is in isolation from and for consideration for the individual student. As in controvercies in which the extremes are debated, the debaters further dig in and reinforce their thoughts. For professionals to debate over one service delivery option over another is about as ludicrious as the allied soldiers arguing, in the face of a common enemy, during the Normandy Invasion, which country's army was best or who had the sharpest uniforms. Itinerant teachers need to rely on their colleagues in other options and accept that they can't be a total comprehensive program for students. A great probability exists that students are being short-changed if one teacher feels that he or she can be all to all of his or her students.

IMPLICATIONS FOR SCHOOL AND TEACHER TRAINING PROGRAM ADMINISTRATORS

Teachers to be effective caregivers must have their own needs met. A frustrated, troubled professional who has lost hope and more frequently than not is thinking about escaping from the realities of a job can not sensitively respond to the needs of students. To be effective over long periods of time and to survive, such caregivers need to resort to priming their own pumps since many administrators, teachers, parents and students do not provide supportive encouragement. Administrators clearly have the responsibility to provide support, encouragement, and reinforcement.

Administrators may not provide this support for a variety of reasons. Unfortunately administrators either have insufficient time, give such support a low priority, or haven't received training in these interpersonal support skills. All too often the low incidence service provider, perhaps being the only such specialist in the district, doesn't have the clout associated with larger numbers and/or is largely forgotten by their supervisor. Another reason is that the supervisor is not very knowledgable about programs for visual handicaps, and, as a result, the specialist must many times function in isolation and independent of needed support. Since some VH teachers have no one to constantly look over their shoulder they may rationalize and consider this to be an advantage. While job autonomy may be considered by some to be an advantage, most specialists would agree that having someone looking over your shoulder who is knowledgeable about VH service delivery is much more valued.

Administrators have a responsibility to properly support these service providers who operate under many less than perfect conditions such as having to teach in closets, not being a part of a building staff, or spending more hours driving than teaching. However, the service provider must accept the realities as inevitably inherent in the job and that the job shortcomings come with the territory. In addition, they will be less frustrated if they realize that these shortcomings will not be significantly altered even by well intentioned attempts to overcome them. As with most jobs, certain things must be tolerated in order to function efficiently and effectively. In rural area service delivery, the teachers must make sure that they can tolerate the realities.

Administrators and teacher training program personnel have a clear responsibility to inform the prospective teachers of the rural area service delivery realities. These realities must be made apparent to the prospective teacher to reduce needless and most distrubtive job attrition. Such teacher turnover distrupts student programs and wastes significant administrative time in resultant recruitment efforts (Bina, 1981).

University programs can inform students not only through lectures and discussions, but by first hand observations and practicum experiences. Administrators should have prospective teachers applicants meet with currently employed district personnel and provide them with an opportunity to travel to the various buildings.

Administrators and university personnel need to encourage the prospective rural area teacher to consider their needs, values, and attitudes with the conditions they would find in such jobs. Tucker (1985) describes the wide range of reactions that individuals experience when rural areas are mentioned. These perceptions range from positive attraction to negative avoidance. He stated,

> Rural areas may be perceived as simple or complex, spiritually nourishing, or very threatening depending on the individual and the situation. The natural environment offers a certain lure of simplicity and constancy that can sometimes provide a form of pleasant escape and solitude, but the wilderness can also provide a different experience each time a person enters it.

In addressing rural service delivery realistically with the prospective teacher, administrators and university personnel must emphasize job shortcomings and job advantages and postives. Emphasizing the postives is imperative if the teacher shortage in rural areas is to be solved. Unfortunately, many prospective job applicants may avoid serious consideration of seeking a job in a rural area due to preconceived, and in many times, inaccurate perceptions of working in a sparely populated environment. Judging from the responses in this study, it is apparent that working in a rural area, while it does have shortcomings, is certainly not without pleasant experiences. The respondents clearly pointed out the professional satisfaction which comes with hard work and the knowledge that their efforts are instrumental in meeting the needs of the student and their family.

Expanding and improving educational services in rural areas is strongly being encouraged by the National Education Association (NEA). The 1986 NEA Representative Assembly resolved support for

> a strong rural educational system and the preservation of the community infrastructure in rural America. The Association believes that rural

> areas contain a range of conditions that make them unique and urges development of programs that recognize and deal with rural areas. It recognizes that equal per pupil funding may not provide equal education. The Association further urges its affiliates to support equal educational programs and the equitable funding of such programs. Neither shall be dependent on geographical location and/or population density.
>
> The Association and its affiliates should encourage institutions of higher education and state agencies to promote training of personnel that will reflect the special needs of rural schools...(A-18)

Unfortunately, there are not enough professionals available for the vacant funded positions in rural areas. Therefore, the recruitment efforts and advertising must continue.

Wanted

Self starting, well organized, cream of the crop professional, with excellent instructional and consultive skills, are critically needed in rural areas. Applicants must have broad skill and content backgrounds, strong patience, acceptance and tolerance for inevitable shortcomings and inherent realities for working in such areas. Individual must accept responsibility for the VH students' current and future success. Professional is expected to provide comprehensive, intensive program by being a jack of all trades, performing a solo, dancing to many tunes, and being cast, in many cases, as the lead actor in the play without benefit of a strong, willing supportive cast and director. Unfortunately salary is not negotiable and doesn't adequately compensate for all the time, effort, and prayers!

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Author: Michael J. Bina, Ed.D.
Principal, Secondary Education
Texas School for the Blind
Austin, Texas 78756
(512) 454-8631

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Friday, March 20, 1987

7:30 - 8:30 am Continental Breakfast
Plaza Suite

7:30 am - 1:30 pm Registration/Information
Plaza Suite Hall

8:30 - 9:30 am General Session
"Special Education: A Perspective From Developing Countries."
Lawrence Campbell, Director, Division of Education and Rehabilitation, Helen Keller International Inc.
Asheville Community Theatre (ACT)

9:35 - 11:00 am Task Force Leaders Meeting
Charter Suite

9:35 - 11:00 am Concurrent Sessions

Early Intervention in Rural States: The Impact of PL 99-457
Sandy Parsons
Royal Suite Leg I/P, Presv, ECI

Slaughtering the Sacred Calf: An Alternative Vocational Assessment and Training Approach
Skeet Creekmore
Consort Suite A Voc, Diag, Eval

Training Parents of Handicapped Students: Adjustment, Management, Communication and Legal Issues
James Jacobs
Regency Suite Parent/Prof, Insv, Leg I/P

Effective Work Study Program in a Suburban/Rural County
Martha Sullivan, Constance Lewis, Adrienne Lichtinger, Diane Fadely, Elmer Wolter
Room 205 Trans, IAC, Voc

Meeting the Needs of the Rural Area Special Education Service Provider
Michael Bina
Charter Suite Insv

Presenters: Pamela D. Potocik
Cynthia L.K. Marshall
Little Tennessee Valley Educational Cooperative
Birth-thru-Three Program
Rt. 9, Box 316
Lenoir City, TN 37771

THE MULTI-PROFESSIONAL TEAM: AN INNOVATIVE APPROACH FOR THE DELIVERY OF HIGH-TECH SERVICES TO YOUNG HANDICAPPED CHILDREN IN RURAL SETTINGS

The ultimate goal in special education is to provide high quality, cost-effective services to individual children and their families. In rural areas, the difficulty in reaching this goal is complicated by wide geographic dispersion of children, wide diversity of handicapping conditions among a relatively small group of children, difficulty recruiting and keeping highly qualified professionals, and a limited funding base. Each child needs a variety of specialized services/interventions which must be coordinated to promote maximum progress. Previous literature has focused on providing these specialized services through one of two "team" approaches: the multidisciplinary team or the transdisciplinary team.

Each team typically consists of a group of educationally-oriented professionals (teachers, psychologists, speech-language pathologists, occupational therapists, physcial therapists, vision specialists, etc.), paraprofessionals, and the parents. Other appropriate persons, such as physicians or other medical personnel, audiologists, nutritionists, etc. might also be included.

On a multidisciplinary team, there is usually an introductory staffing to familiarize each member with the case. Each member is then responsible for completing their individualized assessments of the child. The team meets to hear each member's findings, and each member draws up his own "plan of action" (IEP) incorporating both his own and other members' findings. Typically, children are then seen by the speech-language pathologist and occupational and physical therapists only for specific therapies, and are usually taken from the classroom individually or in small groups for those therapies. The classroom teacher, with paraprofessional support as well as consultation with the involved specilists, is primarily responsible for other educational aspects of the child's program.

A similar introductory staffing is likely to take place for the transdisciplinary team. Assessment, however, utilizes a team approach. An assessment tool which looks at a variety of aspects of the child's development is administered in an observational setting so that each member of the team observes the others' interactions with the child. In a follow-up team meeting, a plan of action (IEP) is drawn up to be carried out primarily by the teacher/case manager, with available consultation from specialists.

In the field, both approaches have been shown to be quite successful. However, educators have become acutely aware that there are advantages and disadvantages in either approach. "Warriors" for each approach can argue the strengths of each. Rather than comparing the two approaches, however, it seems more effective to combine the advantages of each philosophical viewpoint into one practice. The Little Tennessee Valley Educational Cooperative Birth-through-Three Program is utilizing such an approach, referred to as the Multi-Professional Team.

The focus of the Multi-Professional Team is on utilizing a network of highly trained multi-professionals. The assumption is that programming for severely handicapped children requires the skill and expertise of a variety of well-trained specialists. Only the highly trained educationally-oriented specialist can be expected to possess the complex, high-technology skills required for effective precision intervention. Further, the sharing of skills across professional boundaries enhances the ability of each professional staff member to comprehensively address the individual needs of the child and family.

More specifically, the Little Tennessee Valley Educational Cooperative Birth-thru-Three Program provides direct services from highly qualified professionals to 22 severely handicapped birth-thru-three-year-old children in two rural counties in East Tennessee. The children attend center-based programs in their local communities in groups of 5 to 7 for two half-days each week. Direct services to the children at each site are provided by a site coordinator/psychologist, a lead teacher, two teaching assistants, a speech-language pathologist, an occupational therapist, a physical therapist, and a teacher of the visually impaired. The coordinator, lead teacher, and teaching assistants are assigned to a specific center, while the other professional staff members work at both centers. The site coordinators collaborate on administrative issues for the program as a whole, such as services to children, services to parents, staff development, program evaluation, etc. The staff members, in conjunction with the parents, comprise the Multi-Professional Team.

The primary task of the Multi-Professional Team is to develop and implement an appropriate individualized educational program (IEP) for each child enrolled in the program. Each child's IEP consists of goals and objectives based upon his/her developmental levels in five targeted areas: cognition/perception, speech/language, fine motor, gross motor, and personal-social/adaptive.

The initial step in the development of the IEP involves the assessment process. As referrals are received, the site coordinator makes an initial home visit to conduct developmental screening to determine eligibility, to complete extensive case history and intake information, to observe the child within the natural environment, and to establish a two-way communication system between the program staff and the family. The site coordinator, who serves as the case manager for each child and family enrolled in the program, conducts an introductory staffing with the members of the Multi-Professional Team to familiarize each member with the case.

The Multi-Professional assessment begins with a team approach, whereby each child is administered an evaluation tool which looks at a variety of aspects of development. The evaluation is conducted in an observational setting so that each member of he team observes the other's interactions with the child. The Program for Early Attention to Children with Handicaps (PEACH Scales) is the tool utilized in the Birth-thru-Three Program for program evaluation and initial program planning. Each component of the assessment tool is admimistered by the professional with expertise in the appropriate area. Specifically, conceptual and perceptual scales are adminstered by psychologists, language scales are administered by the speech-language pathologist, fine motor scales are administered by the occupational therapist, gross motor scales are administered by the physical therapist, and personal-social scales are completed by the lead teacher utilizing parent report. Parents also complete questionnaires to give information on the child's current level of development and to list what is considered important for the child to learn during the year, from he parents' perspective.

After completion of the team assessment, each member of the Multi-Professional Team is then responsible for completing their individualized assessments of the child. For example, the psychologist would administer individual standardized intelligence tests, measures of personal-social/adaptive behavior, and other apopropriate developmental measures which would assist in developing the intervention plan in cognitive and emotional development. The speech-language pathologist, occupational therapist, physical therapist, and teacher of the visually-impaired would each complete further diagnostic evaluations in their respective areas of experise. Additional medical, audiological, visual, nutritional, etc. information is also obtained during this time. Each member of the team consults with one another frequently during the assessment process.

After all evaluations are completed, the Multi-Professional Team, then meets to share all diagnostic findings, to develop the individual educational plan, and to recommend appropriate placement for meeting the child's needs. In the same manner as in the assessment process, each member of the Multi-Professional Team proposes the goals and objectives in their respective areas of expertise. Specifically, the psychologist develops the IEP in cognition and social-emotional skills, the speech-language pathologist develops the IEP for language skills/speech-language therapy, the occupational therapist develops the IEP for fine motor skills and self-help skills/occupational therapy, and the physical therapist develops the IEP for gross motor skills/physical therapy. Together the team members coordinate the goals and objectives across all developmental domains.

The continued efforts of the Multi-Professional Team are vital to the implementation of each child's individual educational program. Professionals, paraprofessionals, and parents consult with each other to insure continuity in each child's program across all disciplines. Each member of the core classroom team (lead teacher and teaching assistants) is trained to work with one member of the professional staff (psychologist, speech-language pathologist, occupational therapist, physical therapist, vision specialist, etc.), becoming an "expert" in a particular discipline. That expertise is shared with all staff members so that the most effective methods for meeting the child's needs can be discovered. On a daily basis, intervention is carried out by the lead teacher and teaching assistants under the supervision of the professional staff. Each professional staff member trains a core classroom staff member in the target area associated with his/her area of specialty (i.e. psychologist works wth percptuo-cognitive; physical therapist with gross motor, etc.). Each child sees each professional on the average of once every-other-week (variations depend on the child's individual needs). The classroom is organized to provide minimal distractions to the children but remain open for all staff to observe. For example, storage cabinets are utilized as room dividers to create learning stations for each area of development. The dividers are four feet in height to minimize distractions to the child but allow for adult observation. The daily schedule is organized so that each child receives one-on-one intervention in each target area, rotating from station-to-station throughout the day. Direct therapies occur within the classroom, which further promotes collaboration among all staff members.

The value of the Multi-Professional Team cannot be underestimated, particularly in rural areas. Not only does the approach allow for direct, high quality, professional services to handicapped children and their families, but also the Multi-Professional Team approach creates a network of support, which is vital to the recruitment and maintenance of professional personnel. Essentially, a cooperative administrative structure maximizes the creation and maintenance of a professional emotional support network among staff members. The administrative priority is to support the professionals to perform their respective roles by assisting in eliminating blocking variables which prevent them from effective functioning. Examples of such support include: emphasis on alloting time for coordination and collaboration, monthly meetings among all staff members to discuss child cases or to meet needs identified by the staff itself; time and stress management, and assistance in working with outside agencies to promote comprehensive services for children and families.

Program evaluation data lends support to the effectiveness of the Multi-Professional Team. Significant progress has been made by children enrolled in the program. Parent evaluation and staff evaluation further support the utilization of such an approach for the delivery of services, particularly in rural areas. Outside evaluations have clearly documented the high quality, cost-effective nature of the approach.

In summary, the Multi-Professional Team is an innovative approach for the delivery of high-tech services to young handicapped children in rural settings. The approach allows for high quality, cost-effective services to individual chidren and their families, and creates a support system for professionals in rural areas.

Primary Presenter:
Carolyn G. Critcher, MSPA, CCC/Sp-L

Co-Presenter:
Jerome H. Morton
Executive Director

Little TN. Valley Ed. Cooperative
Route 9, Box 316
Lenoir City, TN 37771

USE OF TOTAL COMMUNICATION TO FACILITATE VERBAL COMMUNICATION DEVELOPMENT IN YOUNG CHILDREN

This presentation includes extensive use of video tapes to demonstrate speech and language facilitation techniques used in the Blount County Birth-thru-Three program. Blount County is a rural county in East Tennessee. The Birth-thru-Three program provides both home-based and center-based services. Three groups of five children come to the center. Each group comes to the center two half-days per week. On any one day, the center is staffed by a lead teacher, two teaching assistants, and at least one more professional. The psychologist, speech language pathologist, occupational therapist, and physical therapist rotate so that one of them is there each day. After the parents bring the children to the center, they sometimes stay to observe, participate in center activities, read in the parent information corner, or leave for some free time for themselves. The children begin with a supervised free-play time until everyone arrives. Next is music time. Then individual intervention stations are conducted in which children work on the various IEP objectives in fine motor, gross motor, cognition and speech and language. Since one person carries out fine motor, another gross motor, etc., after 15 to 20 minutes in the first station the children rotate to another station. In the middle of the morning we have snack time which provides ample opportuniies for speech and language stimulation and facilitation in natural context. It is especially good for increasing request making. This is also a time to work on self-help skills such as feeding and washing. Following snack, there's diapering, pottying and a short free-play time. Then more stations. Finally, there is a group fine motor or tactile time (such as playing with beans or making a craft) and then it is time to go home.

Although ongoing research is conducted in the Birth-thru-Three program, this is not a research presentation. This is a "how to" presentation; how to use total communication to facilitate speech and language development. I will cover (1) What is total communication? (2) Why use total communication? (3) How to use total communication to facilitate verbal communication development in young children?

What is total communication? Very simply, total communication is the use of vocalizations, gestures, facial expressions, eye contact, manual signs, and speech. It is the total use of all avenues to communicate. Although speech is the ultimate goal, our focus is on interpersonal interaction and communication rather than on speech production. To model appropriate use of speech, spoken words always accompany the manual signs and gestures.

Why use total communication? Even though a child is not using speech or imitating spoken words, it is important for him to be expected to express himself in some way. In Piaget's framework, we see that the use of phenomenalistic procedures like a generalized excitement (a gross motor procedure) develops in stage 3 at the 4 to 8 month levels. Simple gestural imitation is also at that stage. However, speech imitation in Piaget's framework does not develop until stages 4 and 5 at the 8 to 12 and the 12 to 18 month levels. So, we see that the use of gestures and gestural imitation develops earlier than speech imitation. Another advantage to the use of gestures and manual signs is that they can be prompted physically. The child's hand can be taken and shaped into the correct position. If the child is not imitating speech or gestures or signs then the signs or gestures can be physically prompted. It is not practical to physically prompt speech. If you've ever tried to put your hands on a child's mouth and make him say a word, you know what I mean. I have a final rationale for using manual signs in addition to gestures. Think of speech and language as being two complex tasks with language being the use of abstract symbols and speech being a complex motor behavior. To teach spoken language, we want to break this down into it's two components, so that first the use of abstract symbols is learned and then the complex motor behavior is acquired. Gestures are comprised of less abstract symbols and less complex motor behaviors. To bridge the gap from gestures into spoken language we can use manual signs which involve more abstract symbols but still is less complex motor behaviors. After the child is able to see the more abstract symbol of manual sign language, then we hypothesize that it will be easier for him to learn the more complex motor act of the spoken word. This hypotheis is discussed in detail in Joseph K. Carrier, Jr's work, the Nonspeech Language Initiation Programs in the Schiefelbusch series.

Our last question is, How is total communication used? Snack time is a very natural time for the development of communication skills, especially those skills required to make requests for snack items. Types of communicative functions or pragmatic intents are to request objects, request actions, comment on objects, comment on actions, give informaion, direct attention to self for communication, direct attention to self for social reasons, to protest or reject, to greet or part, to request information, and to label objects. We de-emphasize the use of labels and comments and emphasize the use of requesting objects which can be reinforced with the natural consequence which is giving of the object requested. It is not necessary or even natural that a speech therapist be the only one providing the stimulation. Speech and language stimulation is provided by parents, teaching assistants, teachers, professionals in other disciplines, and even by peers. With a little training and practice it can be provided in a systematic way. It is suggested that the speech language pathologist observe and record data periodically. Bloom and Lahey presents a useful framework for systematizing the stimulation techniques. It is the use of new forms for old functions. That is, if a child uses one form, for example, to request juice, he is taught a new form, such as a manual sign or spoken word to make the same request. Thus, once a child indicates a desire even with an eye gaze, we prompt a gesture or a manual sign and pair a speech model with our prompt. We gradually shape vocalization and speech, and the gestures or signs extinguish naturally. A heirarchy of lower level forms at higher level forms follows:

1. reach - vocalize
2. physical manipulation of adult - touch adult's hand
3. alternate gaze between object and adult
4. generalized excitement - gross motor procedure with arms or legs
5. demand pat
6. point to spot, as is to say "put it there"
7. hold cup out
8. "Gimme" gesture
9. point to desired object
10. point to self
11. idiosyncradic gestures or signs
12. conventional manual signs
13. vocalization paired with sign
14. speech paired with sign
15. speech

How do we teach the use of new forms? We use minimal prompting procedures and differential reinforcement. First, we create a need for communication. We have the juice and cookies, etc., out of the children's reach. One staff member is the provider of the snack items. She has them close to her; she comments that she has them; she holds them up and looks expectantly to see if anyone will ask for one. She creates a need for communication and then pauses. This provides the child an opportunity to make a request. Other staff members an peers model the request in natural context. A more developed child may ask for juice or another staff member may ask for a cookie. If the child does not make a request, we give a verbal instruction such as "tell Kathy" or we provide physical prompts for gestures and signs so that the child does receive food. He does not go without getting a snack. Instead, a staff member helps him to make a request. To prevent interrupting the conversational turn-taking between the child and the snack provider, instructions and prompts are provided by a second adult. In using minimal prompting procedures, we do not initially provide physical prompts, instructions to imitate, and imitative models. We provided those only after more subtle stimuli have failed to elicit a response. And we provide them from a level of least assistance to most assistance. The heirarchy is:

(1) model the behaviors in context
(2) provide imitative models
(3) provide instructions to imitate
(4) provide partial physical prompts
(5) provide full manual guidance prompts.

In addition, we prefer not to tell a child he's wrong, but to provide natural consequences. If he seems to want peanut butter, but says "fruit" he is given fruit. Finally, differential reinforcement is used to shape increased use of new forms. For example, if a child is consistently using natural gestures and only occassionally uses manual signs then the snack provider would "up the ante". She would "play dumb" and act like she hadn't understood the gesture. This provides the child an opportunity to use the manual sign. When he uses the sign (either spontaneously or in response to prompts) then he receives the snack requested.

In the following video tapes you'll see remarkable situations the staff members turn into opportunities to facilitate communication. You will also see some missed or even mismanaged opportunities. It is important to see the successes and the failures to realize that it is not necessary to be perfect. Providing language stimulation in natural context is both a science and an art. Practice is required. The children benefit from our attempts even if they are not perfect. It is not unusual to feel self-conscious when first attempting to provide language stimulation. It is hoped that reducing the pressure to do things "just right" will encourage you to begin.

The first video tape is of music time. Finger play and songs are used to encourage vocal and motor imitations and other pre-language skills such as mutual attention, joint activity routines, and turn taking. All three children seen are non-verbal. Micah, on the left, is diagnosed with spinabifida and developmental delay. He is fed through a G-tube. He is 2 1/2 years old; a teaching assistant is sitting with him. Lonnie, in the middle, is diagnosed with cerebral palsy and developmental delay. He is 3 years old. He does not imitate well, but will be imitating gesture in song as the tape begins. The physical therapist, Nancy Dunning, is with him. She has positioned him for functional movement and she also provides good language stimulation in the context of music time. On the right is Owen. His diagnosis is low muscle tone, possibly Prater Willie Syndrome. He is 11 months old and the lead teacher, Kathy, is with him.

As the tape begins, you will see Micah, who often appears inattentive, clapping at the end of the song. This is one of the earliest imitations we see. Next, is a verbo-tonal musical stimulation rhyme. See Lonnie spontaneously use the "round and round" gesture.

Next, we see music time with a higher functioning group. Danny and Joey on the left, are three year two month old twins who were born three months prematurely. They both have recurrent otitis media with scarring of the eardrums and stiff middle ear systems. They are being followed audiologically. In the middle is three year old Joel, who experienced early neglect and is now in a foster home. He also has motor planning problems. He spoke less than ten words a year ago. Now he has greater than a 100 word vocabulary and is using short word-combinations. On the right is Jessica, called Jessi. She is a 3 year 3 month old diagnosed with mental retardation, secondary to Soto Syndrome. She has a fifteen word vocabulary and word-combinations such as "come on" and "my daddy". She uses many gestures. Pam Potocik, the psychologist, is with her. The other staff, Jan Barton and Suzanne Martin are teaching assistants.

Notice the opportunities for conversation during music time with both speech and gestures. You will see Jessica point to Danny and Joey and Suzanne speaks for her "Oh Danny and Joey too". Suzanne is modeling new forms, spoken words for old functions, Jessica's gesture. You will also see that the physical assistance prompts are provided after the child has first had ample opportunity to imitate spontaneously.

Next, we see the lower functioning group at snack time. Kathy is handling the snack foods. She is the provider. She says "I have fruit today." Lonnie does not speak but does reach toward the fruit. A teaching assistant physically prompts him to use a "gimme" gesture. Kathy reinforces his use of the gesture by giving him fruit. She also provides speech stimulation by saying "fruit, fruit for Lonnie." Next we see Owen, the 11 month old, and Kathy in a prelinguistic conversation. Owen vocalizes while looking at the fruit. Kathy says, "Oh you want fruit, Owen, here is some fruit." Sh puts it on his high chair tray. He vocalizes displeasure. Kathy says "Oh you wanted it in your mouth." "You can do it." "You can use your hand." The last child, Micah, appears to be inattentive. Kathy gives him plenty of time to indicate a desire and she responds to his facial expressions. He also reaches for a cracker. Kathy provides language stimulation as she gives him the cracker, "Cracker, Here's a cracker." At the end of snack time Kathy says "we're all done" as she signs finished . She also comments on the snack items as she puts them away.

Next we see the higher level group Danny, Joey, Joel and Jessica. Suzanne asks "Do you want juice or fruit?" She prompts Jessica, "Tell me juice." Jessica does not respond, but Joel signs and says "juice" and is given juice. Jessica then points to herself and then to Suzanne. Jessica does not have Suzanne's attention and the teaching assistant, Jan who is seated next to Jessica, plays dumb and acts like Jessica is commenting rather than making a request. Since Jessica already uses gestures well, Jan and Suzanne are expecting Jessica to use speech or sign to make her requests known. Next Joey says "peanut butter" but he did not have Suzanne's attention, but his attention shifted and he commented on a cherry that dropped on the floor. Suzanne saw the cherry and threw it away and commented that it was gone. This would have also been a good time for her to voice what Joey was thinking, such as, "Oh look a cherry is on the floor, it's right there. Let's throw it away. There its gone now." Next Joel wants to leave the table. We do like to follow the child's lead and encourage decision making and self expression, but Joel has to follow the rules and wash his face before going to play. Next, Jessica is prompted into signing cracker and peanut butter . Then she signs cracker again, spontaneously, and receives another cracker. She seems to want peanut butter on her cracker but makes a mistake and signs fruit. She is given fruit and she settles for that. Then Jessica vocalizes displeasure over an empty glass and shows the glass to Jan. Jan comments that it is all gone. Jessica ask Jan for juice; she says "juice" with speech, and Jan directs her to ask Suzanne, but Jessica does not. So we see a missed opportunity to reinforce speech by providing the requested juice. But all is not lost, because Jessica again asks Jan for juice. Jan helps her to get Suzanne's attention and Jessica uses a two-word combination to ask Suzanne for "more juice." She does this by proving appropriate models and prompts, by playing dumb, and "upping the ante" to differentially reinforce Jessica's communication behavior. SHe has been helped to use her best speech and language skills. Since this has occured in a natural communication situation it is likely that these skills will generalize readily to other situations throughout the daily routine.

In conclusion, you see that what I am proposing is not that new. I am proposing that children benefit when we provide systematic language stimulation in natural context, and use basic behavorial prinicples to teach new forms for old functions. The emphasis is on communication and interpersonal interaction and facilitating the child's attempts to express requests successfully. We also see that it is easy to learn and use the few manual signs needed.

American Sign Language - suggested vocabulary

cup
napkin
spoon
wash
eat
drink
more
bathroom

fruit
apple
banana
cookie
cheese
nuts
cracker
juice

finished
want
book
shoes
hat
jump
music

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CONCURRENT SESSIONS

FRIDAY, MARCH 20, 1987

11:20 - 11:50 AM

Gilbert Guerin
Joseph Roberts
San Jose State University
San Jose, CA 95192-0078

San Jose State University Reaches Out with a New Rural Program

Although San Jose State University is situated in the center of urban/suburban Silicon Valley, the University also serves a large rural area. This diverse service area requires flexible approaches to teacher preparation. Added to the challenge of preparing teachers to work in different community settings has been the need to meet a rapidly increasing shortage of special education teachers. Approximately twenty-percent of special education teaching credentials issued in the last five years have been issued on an emergency basis, and this problem has been more acute in rural areas than in urban areas.

Since 1977 a few special education classes have been offered in the rural area served by the University, but it wasn't until San Jose State University developed an Instruction Television Fixed System (ITFS) in 1983 that a comprehensive rural special education teacher training program could be undertaken. The first step in the process was scheduling all courses required for the Learning Handicap Specialist credential on the ITFS system, as well as the generic courses required for the Severely Handicapped credential. This step allowed students who lived as far as one hundred miles from the campus to take credential courses at community college ITPS receiving sites located in the rural areas.

The problem has been establishing a rural special education teacher training program that recruited and trained teachers who would choose to continue to work and to live in the rural area. Since, in California, special education credentials are issued to teachers who hold a regular teaching credential, the recruitment effort has been focused on regular educators who live and work in rural areas. Brouchures were prepared and mailed to all regular education teachers living in the rural areas served by the Unviersity as well as to regular education teachers who were recent graduates of the University's regular teacher preparation program. At the same time a network of special education professionals was established.

It was apparent from the outset that the University had to become a part of the rural area it served. An advisory committee was established with membership drawn from rural special education administrators, teachers, psychologists, etc. The advisory committee became an invaluable part of the University preparation program. The committee has been helpful in recommending approaches to recruiting students for the program, suggesting curriculum changes and/or adaptations, providing feedback on the ITFS system, providing topics of interest and revising and planning programs. It provides the professional support network in the rural areas.

One important element in this program has been State approval of an intern program. Under this program, the University is permitted to provide temporary certification for interns while they complete their training program. Interns work at full salary but receive University supervision from the beginning of their program. This has allowed regular teachers to become special educators while continuing full time employment.

The purpose of this presentation is to introduce educators to the processes used by an urban/rural university to begin a rural special education training program. The presenters will share materials and methods they have used in the process. Emphasis will be placed on the intern program development and implementation.

Gilbert R. Guerin, Ph.D.
Division Head
Special Education and Rehabilitative Services
San Jose State University

Joseph Roberts, Ed.D.
Program Manager
Special Education for Rural Populations Program
San Jose State Unviersity

Teaching in Rural America:
Dual Certification,
A Redefinition of Regular and Special Education Roles

Presentors:

Dr. David Bell
Director Teacher Education

Dr. Georgine Steinmiller
Assistant Professor of Special Education

Arkansas College
Batesville, Arkansas 72501
(501) 793-9813

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ABSTRACT

This paper will describe one school's effort to address an increasing need that is found across the United States for teachers to work both in special and elementary education. The paper will describe the formulations and planning for this dual certification track, and describe the courses included in the program.

Rural schools comprise 67 percent of all schools in the United States. One third of all students live in rural America. A predominant number of teacher preparation programs do not adequately prepare teachers to meet the unique challenges of teaching in rural areas.

Numerous small public school systems are in the geographic area served by Arkansas College. These schools need teachers who can teach in more than one area. Arkansas College is initiating an option for students to become certified in both special education and elementary education through a dual, four-year program. This option serves as a model or point of consideration for other small colleges that serve similar rural student populations.

Dr. David Bell
Director Teacher Education
Dr. Georgine Steinmiller
Assistant Professor Special
  Education
Arkansas College
Batesville, AR 72501

"Teaching in Rural America: Dual Certification, A Redefinition of Regular and Special Education Roles"

INTRODUCTION:

An increasing need of the public schools across the United States is employing teachers who can function in more than one teaching area. This need for teachers with multiple teaching areas is especially acute for the rural schools because a predominant number of teacher preparation programs do not adequately prepare teachers to meet the increased individual demands of teaching in rural areas, and the majority of state certification laws do not recognize the unique personnel needs of rural areas. These teachers who have the abilities and training to teach in more than one area are especially sought after by the rural schools.

Ferrara, Hirshoren, Levin (1983) determined that one of the most difficult problems facing state education agencies is that of providing for special education services in rural areas. One third of all students live in rural America, and rural schools comprise 67 percent of all schools in the United States. These schools are an important part of the culture of the rural family structure. Rural areas pose unique challenges for schools such as high transportation costs, difficulties of obtaining specialized services and low tax bases. Resistance to change, funding, and distances between schools are major obstacles to providing special education services in rural schools.

Across the nation, one particularly acute problem for rural schools is a personnel shortage. Rural schools report that the recruiting and retaining of qualified staff are significant impediments to providing services (Helge, 1983). In very few other areas of certification are there as many available employment opportunities as there are today in the field of Special Education. One study by the Office of Special Education and Rehabilitative Services of the U.S. Department of Education revealed that approximately 57,250 additional teachers are needed to provide special education for all school-age children and youth who require it.

One reason for poor staff retention in rural areas is the inappropriate preservice training many teachers receive. With the increased trend toward mainstreaming our special education population, many elementary education teachers are often required to serve a special population for which they have little or no training (Bullock, 1985; Ferrara, et. al. 1983). To remedy this deficit in instructional training, we have historically relied heavily on inservice programs to train teachers how to work with special needs students. Seldom has this "first aid" approach worked. Instead a well-planned curriculum with thorough instruction needs to be implemented at the preservice training level.

Sesow and Adams' (1982) research indicated a positive correlation between the amount of special education training and receptive attitudes about mainstreaming. The teachers surveyed felt competent in their preparation to teach special children when those teachers had received sufficient coursework instruction in that area. Flynn, et. al (1978) in a follow-up study of their education graduates found that even those teachers that felt a need for further special education course work were reluctant to return to college for that training. Thus without appropriate preservice coursework, many elementary education teachers lack the appropriate training to work with the special education population which those educators will face in their classrooms (Bullock, 1985).

Attitudes of elementary education teachers are key variables to successful mainstreaming. The teacher's perception of competency is the key to their attitudes (Leyser & Abrams, 1983, Leyser, Abrams, Lipscomb, 1982; Sesow & Adams, 1982). The more "prepared" a teacher feels to teach special students, the more positive the teacher's attitudes (Larrivee, 1981). The importance for thorough teacher preparation cannot be underestimated.

MEETING THE PROBLEM:

An important role teacher educators play in our society is to stay abreast of the current needs of local school systems. In the geographic areas served by most colleges and universities, there are numerous, small, public school systems. These schools need teachers who can teach in more than one area of certification. Many of our rural schools desperately need the flexibility to utilize teachers in more than one teaching area (Carlsen and Dunne, 1981). Many do not need a full-time special education teacher, but instead a teacher who can teach in this area for a portion of the day and work in another area for the balance of the day.

Having a teacher who is capable of teaching in both special and elementary classes gives the rural schools the option to have a teacher teach 1/2 special education and 1/2 time in the elementary classroom. This capability provides the rural schools with more flexibility in staffing. Teachers may also avoid the burn-out tendency because of the option to teach in a variety of environments.

Requests from area schools which increase the employment prospects of students and a desire to further good teaching have resulted in the initiation of this dual training program. This program fuses special education with elementary education. The program increases the employment prospect of students, meets the needs of our area schools, and furthers the effort to provide quality teacher training.

This dual program is one means by which both elementary and special education teachers can become more adept teachers. The dual training not only increases the elementary teacher's effectiveness, but also the special education teachers will be better prepared to work with students in the mainstream. These teachers will know what the elementary and special education teachers expect from the student and can better understand how to make the transition between elementary and special education a successful experience. This makes one large step toward the merger of special and elementary education as suggested in the literature (Stainback and Stainback, 1984). (Appendix 1 details the course requirements for this dual program.)

SPECIFIC LEARNINGS FROM DUAL PROGRAM OPTION:

The literature suggests that rural special educators will need to have the skills to address a very heterogeneous population (Ferrara, et. al., 1983). Arkansas trains and certifies special education teachers in a non-categorical fashion. Non-categorical refers to a teaching certificate which includes mild handicaps in mental retardation, learning disabilities, and behavior disorders. This helps rural communities that may have only a few in each category of mildly retarded, learning disabled, and/or behavior disordered students. The Characteristics of the Mildly Handicapped course and the Methods and Materials of Exceptional Child course focus directly into all three mildly handicapping areas.

For the special education teacher, a great advantage of this program is the coordination of efforts between special and elementary education (Bullock, 1985; Kopit, 1982). The students learn in-depth theories for teaching elementary math, science, economics, reading, social studies, music and art. The emphasis in the special education courses can then be one of application of the above strategies for mildly handicapped students. More time can be spent with specific techniques relevant to the student's special needs rather than spending a great deal of time teaching the foundations of each subject area. This cooperation between special and elementary education is essential to best train all teachers to meet the needs of our students (Stainback and Stainback, 1984).

A great advantage for the elementary teacher is the strong emphasis on human growth and development, assessment, and behavior modification strategies. The elementary teacher receives a thorough knowledge of strategies used in special education to be able to meet the needs of the special education students in the regular class. The confidence of adequate training has a positive effect on attitudes about mainstreaming (Hoover & Sakofs, 1985). Through the dual curriculum, elementary teachers will experience a strong emphasis in special education assessment, individualed instruction, legislation and the law, Individual Educational Plans, behavior management techniques, parental involvement, public relations, and career education.

Both the elementary education teacher and the special education teacher benefit from the materials and methods of the dual curriculum, making a stronger more flexible teacher (Carlsen & Dunne, 1981). This has been found true in rural schools where teachers need to be flexible and capable of teaching in many areas. This dual program does not emphasize "a jack of all trades or master of none" approach, but instead a master of two very important areas, elementary and special education.

An example of one of the specific areas covered within the dual curriculum is the importance of knowing oneself. One must be aware of the aspects of one's personality needed for rural special education. Questions probe personality factors such as: Do you like small towns? What do you value in your home environment? Does isolation bother you? Do you like knowing your neighbors well and their knowing you well? Can you work with diverse student populations?

We also deal directly with the public relation role of special educators and their need to get along with other teachers. In rural schools, all teacher must play a number of roles. The special education teacher must serve as teacher, liaison, consultant, counselor, etc. It is vital that the special education teacher, even when not required, should volunteer for hall duty, lunch duty, just like the elementary education teachers. Emphasis is placed on extra-curricular activities. Elementary education teachers should also express interest in special education activities.

Another example is the emphasis placed on career education. Teachers need to obtain knowledge about the rural community and what jobs are available for students. Cooperation with local employers is strongly stressed.

CONCLUSION:

It is time in our teacher preparation programs to address the needs of rural schools for teachers who can teach in more than one area. It is time to identify the particular needs of training teachers for working in rural areas and developing a well-planned curriculum of appropriate pre-service training. Implementation of appropriate training should aid in retention of personnel in rural areas and assist with providing the required special education services for these rural schools. It is time to provide a redefinition of the roles of elementary and special education teachers. In training teachers for working in rural settings, the traditional roles merge. Broadly-based training programs provide educators with the skills, knowledge, and attitudes to work in a variety of teaching situations. Teachers with this broadly-based training will aid the rural schools in delivering quality instruction to their students. Perhaps this dual program option can serve as a point of consideration for other small colleges that prepare teachers for service in largely rural geographic areas.

Name ____________________
Catalog Year ____________________

ACADEMIC PROGRAM
CHECK SHEET
B.A.

ELEMENTARY EDUCATION/SPECIAL EDUCATION
1986-87

Appendix 1

CORE CURRICULUM 25 Credits

T.C.	Req.	Course	Title
___	1	Cor 100	Personal Develop. Seminar
___	3	Eng 101	Freshman Composition I
___	3	Eng 102	Freshman Composition II
___	1	Ped 100	Physical Fitness I
___	1	Ped 101-120	Any Activity Courses
___	3	Rph 200	Intro to the Bible
___	3	Eng 223 or 224	Masterpieces of the Western World I & II
___	3	Pls 101	U.S. Gov't in Perspective
___	3	Sci 100	Biology
___	4	Sci 110	Physical Science

OTHER LIBERAL ARTS REQUIREMENTS 39 Credits

T.C.	Req.	Course	Title
___	3	Sci 314 or Eco 311 (ED 311 or 314 Geography)	
___	3	ENG	Speech correction or a [language development] course
___	3	PED 340	Adaptive Physical Education
___	3	PSY 310	Developmental Psychology I
___	3	PSY 311	Development Psychology II
___	3	PSY 330	Behavior Modification
___	3	Sth 101	Basic Speech Communication
___	3	Psy 101	Intro to Psychology
___	3	PE 202	Health & Safety
___	3	His 250 or 251	U.S. History
___	3	ART 270	Art for Elem Teachers
___	3	MUS 227	Music for the Grades
___	3	Psy 302	Ed Psychology

ELEMENTARY EDUCATION COURSE REQUIREMENTS 39 Credits

T.C.	Req.	Course	Title
___	3	ED 200	Math for Elem Teachers
___	3	ED 201	Science for Elem Teachers
___	3	ED 207	Econ for Elem Teachers
___	3	ED 300	School & Society
___	3	ED 312	Children's Literature
___	3	ED 313	Teaching Social Studies
___	3	ED 315	Elementary Methods
___	3	ED 316	Reading Methods
___	3	ED 317	Diag. of Reading
___	3	ED 318	T. Language Arts
___	3	ED 342	Math Methods
___	6	ED 442	Directed Teaching

SPECIAL EDUCATION COURSE REQUIREMENTS 18 Credits

T.C.	Req.	Course	Title
___	3	SPE 270	Intro to Exceptional Children
___	3	SPE 343	Characteristics of the Mildly Handicapped
___	3	SPE 346	Methods & Materials for Exceptional Children
___	3	SPE 428	Evaluation of Exceptional Children
___	6	SPE 443	Directed Practicum

GENERAL ELECTIVES (Credits to total 128)

Endorsement/s ____________________

___ ___ ____________________
___ ___ ____________________
___ ___ ____________________
___ ___ ____________________
___ ___ ____________________

Please note: If you plan to teach in the elementary school you are not required to complete: Mth. 101, His. 210 and His. 211.

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CURIOSITY MEASUREMENT DIFFERENCES BETWEEN RURAL/IMPOVERISHED AND URBAN/AFFLUENT PRESCHOOLERS

John C. Richardson, Ed.D.
Clemson University

Research in the area of curiosity as a form of motivation grew rapidly in the mid sixties. This area of research prompted considerable study through the mid to late seventies and then tapered somewhat. Studies focused on theories, definitions, assessment techniques, and studying variables such as parent personality factors, ethnic backgrounds, academic achievement, age, sex, urban-rural residence, and socio-economic status (Maw and Maw, 1977). Very little research has focused on curiosity measures of rural versus urban residence children since the recent efforts to define rural. Most studies included convenient student populations which were probably only relatively rural.

This examiner will present results of a study comparing measures of curiosity between kendergarten/preschoolers living in a school district which is located in the 24th (100 percentile) ranked rural impoverished county in the United States and a 56 percentile county located in the same state. The 24th ranked county is one of the smallest, poorest, and most rural in South Carolina. The 56th percentile county is the largest, one of the most affluent, and includes a large regional city. Rankings were established on a five-factor index of the relative poverty status of all 3081 counties in the United States (1960).

Forty randomly selected kindergarten and preschool students from each district will be administered the Task Initiative Test and the Curiosity Box exercise from the Cincinnati Autonomy Test Battery (Banta, 1970), These tests are to be completed during January 1987 as a part of a study to develop a proposal to discern differences in motivation between rural/impoverished and urban/affluent preschoolers as a part of South Carolina's early intervention programs for at-risk children birth to five.

Data will be analyzed for significant differences by sex, age, socioeconomic status, parent demographics, family demographics, and developmental history variables. The primary purpose will be to gain some information which will be helpful in compensating for the lack of strong curiosity traits in at-risk preschoolers.

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Southeast Kansas
Education
Service Center
Rural Route 4 Box 176
316-724-6281 Girard, KS 66743

Doyleen Turner
Program Evaluation Specialist
Program Eval. & Research Dept.

ABSTRACT

PROGRESSIVE INTEGRATION OF PROGRAM EVALUATION SERVICES

Progressive Integration of Program Evaluation Services (PIPES) was developed by the Southeast Kansas Education Service Center to promote and provide technical assistance in the area of program evaluation to special education agencies.

PIPES is an end result of a two year pilot program evaluation study undertaken in 1984 by four special education agencies in Southeast Kansas who had assessed their individual needs and expressed a desire to pool their resources in order to jointly participate in evaluation projects which would be beneficial to them all. Differing slightly in administration organization, but essentially identical in every other aspect, the four special education agencies decided a cooperative venture into program evaluation would have more far reaching results. It would not only save money, but would avoid duplication of topics, provide sharing of individual evaluation outcomes, and would provide the necessary data base from which vital information could be drawn for future studies. Three evaluation projects have been conducted during the last two years which were instrumental in implementing program expansion and staff development.

The Title VI-B grant received for PIPES enables the Southeast Kansas Education Service Center to not only offer services to Southeast Kansas, but to extend services throughout the state, particularly to the rural areas who wish to effectively promote program evaluation in their areas but hesitate to do so because of a lack of trained personnel, lack of funds, and/or a lack of individual interest.

PIPES is a program evaluation effort adopted from the California Plan and works well as a cooperative effort for small districts spread over large geographical areas. Utilization of the electronic bulletin board as a tool for the dissemination and sharing of information, as well as, providing technical assistance and immediate feedback to the more rural special education agencies has been an integral part of this project.

Jo M. Hendrickson
University of Florida
Gainesville, FL 32610

University of Florida Multidisciplinary Diagnostic and Training Program (MDTP)

The University of Florida Multidisciplinary Diagnostic and Training Program (MDTP) has been serving as a resource and technical assistance program for 15-18 school districts in north central Florida for over five years. Many of these districts are small systems with limited resources. Students with diverse medical, learning and behavior problems are referred to the MDTP after the local school district has exhausted its internal support resources/services. Children in grades k - 6 are targetted and included are students who have not qualified for special education as well as those who have been labeled mentally handicapped, emotionally handicapped, physically handicapped, gifted, and learning disabled. In addition to providing comprehensive diagnostic services, the MDTP has a Diagnostic Classroom which may be attended for periods of 1 - 6 weeks. The Diagnostic Classroom provides a setting wherein different instructional materials and methods are employed with each student. The parents and teachers from the home school visit the Diagnostic Classroom and receive extensive data-based suggestions for intervening at home and in the local classroom. A liaison teacher assists parents and teachers in designing and implementing alternative instructional plans. An important aspect of the program is that the liaison consultant is available to the school and parents after the child has been assessed and ostensibly served. Oftentimes children that we have served at an early age are again brought to our attention as they enter middle school. Since the schools and parents are familiar with us, they feel free to call and ask for assistance. This long term follow-up may come in the form of additional form testing, however, oftentimes it simply involves consultation and technical support at the local school.

This presentation will include a description of the MDTP, its goals and operating procedures. Specific educational assessment tactics, liaison teacher consultation procedures and classroom intervention strategies that have been effective in the Diagnostic Classroom will be presented. Procedures for training preservice and inservice professionals will be discussed as well as parent support/training strategies. Handouts will be provided on various procedures. Data on program effectiveness will be discussed briefly.

Presentor:

Jo M. Hendrickson, Ph.D.
Research Coordiator/Liaison Consultant

Terry R. Berkeley, Ed.D.
Co-Director, Early Childhood Project
Department of Special Education
University of Maine at Farmington
Merrill Hall
Farmington, Maine 04938
(207) 778-3501 X. 226

JoAnne W. Putnam, Ph.D.
Co-Director, Early Childhood Project
Department of Special Education
University of Maine at Farmington
Merrill Hall
Farmington, Maine 04938
(207) 778-3501, X. 225

Preparing Early Chidhood Special Educators:

Developing Undergraduate Options in Rural Areas

A presentation for the Seventh Annual National Conference of the American Council on Rural Special Education, Asheville, North Carolina, March 20, 1987.

ABSTRACT

State policy governing early childhood special education is first thought of in terms of the range of ages of the children who will benefit from the provisions of those statutes and, then, whether or not that policy is mandatory or permissive. In Maine, children with special needs below the age of five years are served on a permissive basis; and, services are only offered in 21 of the 120 (17.5%) school districts located in the state. Unfortunately, in those local school districts providing services, a considerable number of preschool teaching vacancies exist.

In order to meet the extensive need for trained personnel in Maine, faculty at the University of Maine at Farmington (UMF), in the state's Western Foothills, have been planning for the start of an early childhood special education major. While the major has not been approved by the University given some recent structural and governance changes currently being decided upon, courses and practica will begin to be offered during the Fall, 1987 Semester. Financial support for this effort has come from the United States Department of Education's, Office of Special Education Program, Division of Personnel Preparation. Needless to say, we are appreciative of their support. However, it should not be inferred that these comments reflect their opinion; rather, this effort is the product of the collective wisdom of a number of Mainers and invited flatlanders who represent that state's leadership in this area.

The initial grant application was written by Dr. JoAnne Putnam, the Co-Director of the Project. Her ability to utilize the 1985-1987 Strategic Plan of the University of Maine at Farmington is the reason why we are speaking to you today. That plan represents the tenacity of Dr. Judith Sturnick, UMF's President, who is dedicated to enhancing the stature of the University. A significant aspect of Dr. Sturnick's Strategic Plan is to focus attention on the design and implementation of programs in early childhood special education and early childhood education. The method to be used to attain these goals is through attracting faculty who can articulate theory and best practices in such a way as to promote leadership and highly useful research. In turn, human service programs for young children with special needs and their families will have a better chance of being stimulated in Maine and in other parts of northern New England. Additionally, it might be inferred from recent political activity that Mainers also support these goals. That is, in the November, 1986 general election, a statewide bond issue was passed authorizing (among other things) the construction of a building dedicated to early education on the UMF campus. Presently, work is underway on developing the plans for that structure scheduled to be completed by the beginning of the Spring, 1989 Semester.

The focus of the program in early childhood special education at UMF is on meeting the varied service delivery options presently seen in Maine. Those options range from serving children and their families in rural, remote, and isolated areas, as well as in meeting the needs of citizens in small urban centers. The implication of this service delivery pattern is that the preparation program must be comprehensive and diverse, not unlike what is occurring in other colleges and universities with similar service characteristics. The unique facet of the work at UMF is that the program is designed for undergraduate students.

Few undergraduate programs in early childhood special education exist across this country. Thus, planning the new program at UMF has involved considerable effort and support from numerous on-campus and off-campus groups. The UMF community has been particularly helpful, so, too, has been the project's Steering Committee whose members represent a significant cross-section professionally and geographically in Maine. Additional opinions about how to specify a viable, effective academic major are currently underway in our discussions with ACRES members, experts at other colleges/universities, service providers from areas similar to those locales found in Maine, from family members who are willing to be of assistance, and from state governement personnel in several states. It has been and continues to be valuable to mull over these insights, prioritize them relative to student needs, move to refining an extensive list of competencies, and, finally, to design, tenatively, coursework and practicum experiences.

The University of Maine at Farmington requires that students who are enrolled in special education, elementary education and secondary education be enrolled in some major concentration in one of those disciplines, as well as having a concentration in some area of study in the liberal arts. Thus, students are required to complete, at a minimum, a 122-semester hour program in order to graduate and obtain a single teaching certification from the State of Maine. The special education major areas where courses are presently offered include mental retardation, emotional disturbance, learning disabilities, and speech correction. Further, extensive practica and practice teaching assignments are required of UMF students; thus, a more realistic view of teaching as a profession is gained by those students.

This brief view of UMF, the modus operandi of the programs available to students in the Department of Special Education, and the new Early Childhood Special Education Program is being offered as introductory information about our efforts. The last part of the time available in the presentation will be to have you gaze over the handout you receieved as you entered here today; then, we would like for you to share your opinions with us about the direction of our efforts, how we can enhance this new program of study, and if our work appears to be realistic.

We appreciate the time you have spent with us and value your opinions, comments, suggestions, criticisms, and recommendations as you are our colleagues. All of us are engaged in important work.

Timothy J. Pettibone
212 Claxton Education Building
University of Tennessee
Knoxville, TN 37996

Ambrose G. Barry
Dept. of Engineering Technology
UNC at Charlotte
Charlotte, NC 28223

Mary E. Roddy
Box 3AG
New Mexico State University
Las Cruces, NM 88003

REMOTE-EDUCATION FOR SPECIAL EDUCATION TEACHERS IN RURAL AREAS: USING EXISTING TECHNOLOGY

BACKGROUND. New Mexico, with a total area of 121,666 square miles, is a state that is sparsely populated. Approximately one half of the total population lives in metropolitan Albuquerque. The remaining population is scattered in small towns and isolated ranches and farms. Vast areas in the state remain totally unpopulated. Even in so-called populated states, vast areas must be classified as rural.

Residents of isolated and remote areas find few services in general are available to them. Many desire opportunities to advance in their profession through education, but are unable to travel to larger communities to take resident courses at one of the state's postsecondary institutions. This has especially been true for special education teachers, who have had continuing pressure to upgrade and remain current in their field. Court cases and both state and federal legislation have plied additional pressure.

Special education teachers in rural areas have long sought to upgrade their teaching skills through continuing education programs sponsored by colleges, universities, local school districts and state departments of education. Unfortunately both faculty and financial resources are often depleted before they reach the more remote areas of the state. Recent developments in telecommunications are making it feasible to deliver various educational services and courses of instruction using relatively low cost and readily available technology.

This study reports on the implementation of a particular system of technology in the outreach delivery of inservice educational services. The basic premise for the project was that major advances could be made in the transfer of knowledge among educators in rural communities by putting communications technology to work.

Basics of the system were conceptualized during the spring of 1986 and field tested during the summer. The field test consisted of several segments of an on-campus class. These sessions were evaluated by both students and teachers.

New Mexico State University has considerable experience with the difficult logistics of reaching a widely dispersed population of teachers in the state. Since 1977, the university has offered quality off-campus graduate level courses to students in remote areas. In general, this has involved great expense in sending a well qualified professor to rural areas to teach on weekends or for extended periods of time during the summer. A recent grant from the Executive Vice President at NMSU, as well as support from the Educational Research Center, allowed us to purchase equipment to develop and implement alternative modes of delivering off-campus courses. Teleconferencing and computer technology are currently able to support the transmission of lessons and allow for two-way interaction with students in remote sites. This same technology has obvious applications in providing inservice educational services to special education teachers.

DESCRIPTION OF THE TECHNOLOGY. Although the Telephone Company has recently increased the cost of private Wide Area Telephone Service (WATS) lines, voice communications via telephone lines and computers provide an attractive alternative to more expensive telecommunications media. Furthermore, when the massive costs of traveling, per diem and human fatigue are calculated in the price of putting a live instructor in a remote classroom, the future of instructional teleconferencing becomes even more viable.

The following equipment was made available by NMSU for use in the project: an audio teleconferencing system (microphones, speaker, and amplifier); headset and boom telephone set; a monochrome video projector; two high resolution (and color) video monitors; several IBM/IBM compatible microcomputers and accessories; a video cassette recorder; and software. The software was selected to provide the following simulated or real functions: electronic chalkboard; slow-scan television; transmission of graphic images; and transmission of text material. These are discussed in more detail in the following paragraphs.

Through this telecommunications system classes (both formal and inservice oreinted) originating in Las Cruces can be transmitted and received by students in remote areas. Two-way audio and computer generated screen images using WATS lines, modems, projection TV and conference telephone systems ensure the integrity of "live" interactive instruction. Graphic and text materials which can be manipulated by both the sender and receiver can be sent through microcomputers and modems. An audio teleconferencing network allows students to enter into discussions with the instructor. The specific technology used in the pilot study is discussed in this section.

==

Insert Figure 1. About Here

==

A Quorum teleconferencing system purchased from AT&T is the conduit for voice communications between the professor in Las Cruces and students in remote sites (see attached listing of vendors for the equipment referenced). Sensitive microphones and strategically placed loudspeakers enable students to hear and be heard by the instructor. Likewise, a boom telephone headset worn by the instructor allows him to comfortably access his computer while talking with his students. Thus, the system provides a communication forum whereby participants can exchange ideas and discuss issues. The computer technology consists of personal computers along with some ancillary equipment and software programs. At the host location in Las Cruces (or any other site for that matter), software programs are run on an IBM or compatible computer with a hard disk drive and two floppy disk drives. Each remote site is equipped with a Compaq portable computer with two floppy disk drives and either video monitors or a video projector system.

Central to the system is a remote control software program called "Carbon Copy" by Meridian Technology. It allows personal computers to access and control one another via modems and telephone lines. In other words, the IBM compatible computer in Las Cruces can operate the portable Compaq at a distant site such as Farmington and visa versa. When two computers are linked together, their screens and keyboards are as one. Whatever is put on the screen by one party will be seen by the other party. Graphics and text materials can be sent back and forth with this program. Text materials, such as those originating from Wordstar or Lotus 1-2-3, can be updated and transmitted almost instantaneously over the phone lines. The transmission of graphic images takes approximately 30 seconds to three minutes. Images must be saved and stored before transmission to a remote site. The variation in time depends upon the amount of graphic information that must be transmitted. Carbon Copy was original designed to be used by service personnel or consultants who could operate remote computers over telephone lines as if they were there obviating the need to hop on the plane and go to the site. We, obviously, have modified that use somewhat. Also there have been some upgrades of this software that allows much more rapid picture transmission.

The software programs, Dr. Halo II and Paintbrush are freehand drawing programs. In addition, both programs are able to capture images from graphic programs and Dr. Halo is able to capture ASCII text files. In conjunction with a graphics tablet called "Summasketch", they become a substitute for an electronic chalkboard. Although "real time" transmission of these images is not possible, the pictures drawn or captured with these software programs can be saved, stored and transmitted with only a few key strokes in a short period of time. A relatively inexpensive video capture system, Image Ace II, can substitute for a slow scan video system. A picture taken with video cameras, VCRs, and video disks can be digitized and captured to disk. The Dr. Halo program can then save the image to a slide show program. This software can be used to send pictures of the teacher. Automenu is a shareware software program allowing for the creation of a custom menu. The menu created for this project permits the instructor to choose from the following programs: [illegible], a text editor, Wordstar, Lotus 1-2-3, Paintbrush, Dr. Halo II, and Slideshow. Carbon Copy runs these programs on the computer at the remote site.

Insert Figure 2. About Here

In summary, the microcomputer system serves several instructional functions. First, the Automenu is an easy to use program allowing access to other software to be used in the system. Among other functions, these programs simulate more expensive electronic media such as electric chalkboard and slow scan video systems as a means of promoting interaction between instructor and students. In addition, the system has the potential for allowing students to complete short assignments and send them to the instructor, as well as access data bases for research or assignments. The third component of the system is a videocassette recorder. Videotapes of the teacher's lecture can be recorded on the NMSU campus and sent to the remote site prior to the scheduled class or inservice session.

RESULTS AND RECOMMENDATIONS. In fact, the field-test project was successful. The technology works and is popular with both students and providers. Nearly all recipients felt that the use of transmitted text and graphics helped their understanding of the material. Even when video tapes are shown, recipients felt that the follow-up "tutorial" interaction is a most attractive feature. In addition to these student comments, providers also liked the technology and felt that it gave them considerable instructional flexibility.

Based on the results of this project it is recommended that:

- documentation needs to be improved to better help providers
- further field trials need to be made
- additional methods of helping providers modify or develop lesson materials need to be explored
- other technologies (besides those addressed here) need to be assessed

In conclusion, this project shows the feasibility of using telecommunication technology for providing special education teachers in rural areas with inservice opportunities.

Vendors of Equipment and Software Mentioned

Carbon Copy (version 3.0) $393 for 2 copies
Meridian Technology
1101 Dove Street, Suite 120
Newport Beach, Ca 92660 (714) 476-2224

Dr. Halo II $113
Media Cybernectics, Inc and International Microcomputer Software, Inc
1299 Fourth Street
San Rapheal, Ca 94902
(415) 454-7101

Image Ace II $299
Lodge Electronics
Streamood, Ill 60103
(312) 837-6553

PC Paintbrush
International Microcomputer Software, Inc.
1299 Fourth Street
San Rapheal Ca 94901
(415) 454-7101

Summasketch Corp $280
777 State Street
Farifield, Conneticut 06430

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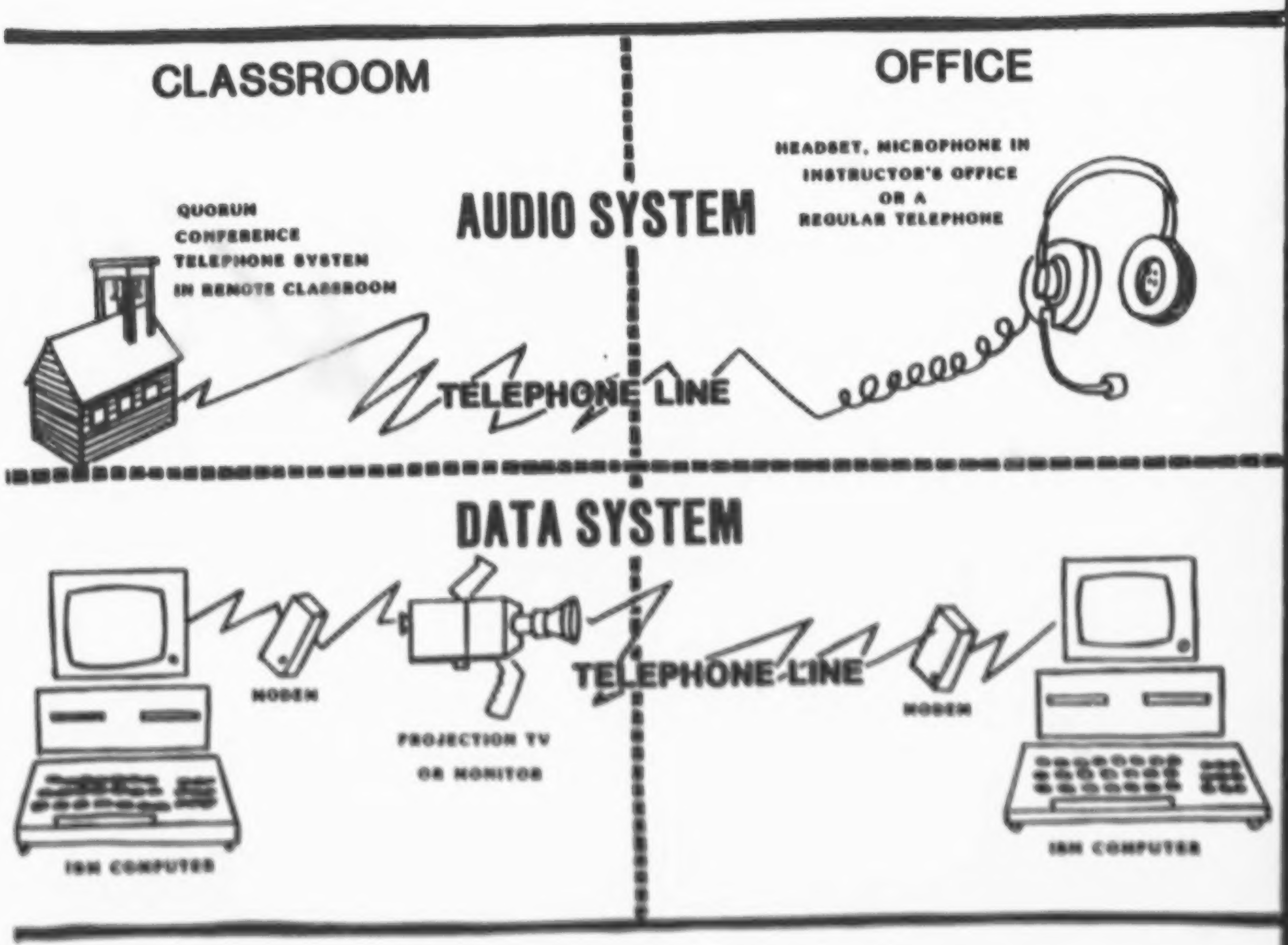
CLASSROOM
OFFICE
AUDIO SYSTEM
QUORUM
CONFERENCE
TELEPHONE SYSTEM
IN REMOTE CLASSROOM
HEADSET, MICROPHONE IN
INSTRUCTOR'S OFFICE
OR A
REGULAR TELEPHONE
TELEPHONE LINE
DATA SYSTEM
MODEM
PROJECTION TV
OR MONITOR
TELEPHONE LINE
MODEM
IBM COMPUTER
IBM COMPUTER

FIGURE 1. New Mexico's Alternative Delivery System.

ALTERNATIVE SYSTEM

ADVANTAGES	DISADVANTAGES
LOWER OPERATIONAL COST	HIGHER INITIAL COST
MOST SITES HAVE TECHNOLOGY	REQUIRES BETTER LESSON PREPARATION
ALLOWS GRAPHICS	NO "LIVE" VIDEO
RETAINS TEACHER/STUDENT INTERACTION	NO 2-WAY VIDEO
USES LOW COST TELEPHONE LINES	REQUIRES 2 LINES

FIGURE 2. Advantages and Disadvantages

Barbara L. Ludlow, Ed.D.
Wilfred D. Wienke, Ed.D.
Special Education Program
West Virginia University
P.O. Box 6122
Morgantown, WV 26506

An On-the-Job Training Program for Rural Teachers of Students with Severe/Profound Handicaps

The preparation of educational personnel to serve handicapped students in rural areas has become a national priority. A number of studies have revealed an alarming shortage of appropriately trained special educators to serve rural schools across the country (Helge, 1981; Smith-Davis et al, 1984; Sontag & Button, 1980). These shortages have created a situation where untrained teachers on temporary out-of-field permits are hired to staff special education programs when qualified personnel are unavailable, a practice that threatens the quality of services (Smith-Davis, 1985; Pipho, 1986). Since most existing personnel preparation programs do not address the development of competencies needed for success in rural areas, even trained teachers are poorly equipped to respond to special needs and problems (Helge, 1983; Sher, 1977). Inappropriate training contributes to teacher turnover when stressful demands of rural teaching cannot be met (Bina, 1981; Marrs, 1983). Attrition rates of special educators in rural schools may be as high as 50% every year (Helge, 1984). The national need for trained teachers for rural special education was formally recognized by Congress in 1983 with the passage of P.L. 96-88 and the resultant "Rural Education Policy Statement."

The passage of H.B. 1271/S. B. 390 by the West Virginia Legislature in 1974 and of P.L. 92-142 by the United States Congress in 1975 created a tremendous need for educators trained in special methods for working with handicapped students, especially those with severe/profound handicapping (SPH) conditions who were previously unserved by the public schools. In addition, court rulings in the Medley and Hartley cases in West Virginia in 1981 have deinstitutionalized the state's residential facilities, returning many severely handicapped students to their own counties and requiring the Department of Education to provide appropriate education to all individuals of school age still confined to institutions. The combined effect of these legislative and litigative actions was to create a situation in which the demand for teachers certified in the area of Severe/Profound Handicaps (SPH) greatly exceeds the supply of qualified and trained personnel. The rural character of the state further compounded the problem, since the low incidence of severe/profound handicapping conditions insured that teaching personnel were few in number and scattered in isolated locations where training programs to improve skills and obtain a professional certificate were not available.

A survey of county school systems revealed that over two-thirds were experiencing difficulties recruiting and retaining special educators, especially for the low incidence handicaps (Ludlow, 1984). A needs assessment survey of programs serving students with severe/profound handicapping conditions identified 82 programs operated by school systems, community agencies and state or private residential facilities employing over 100 professional staff members to provide educational services to nearly 500 school age clients (Ludlow, 1985). These programs projected a need for some 50 additional personnel over the next three years and reported that only 13% of present staff were trained/certified in Severe/Profound Handicaps. To combat these shortages, the state has been forced to rely upon the issuance of temporary, out-of-field teaching permits to individuals who agree to enroll in training programs leading to teaching certification or to accept teachers with the existing certificate in Mental Retardation, even though such programs failed to include any training in the highly specialized techniques essential to appropriate instruction of students with profound mental retardation, serious sensory and physical impairments, and multiple handicapping conditions (West Virginia DOE, 1985). The demand for certified teachers has far surpassed the capacity of institutions of higher education in the state to provide them. New approaches to training were clearly needed to effectively address the critical shortage of certified special educators for students with severe/profound handicaps in West Virginia and other rural areas.

Program Operation

The WVU Severe/Profound Handicaps Training Program is National Council for Accreditation of Teacher Education (NCATE) accredited and state approved to offer a Master's degree and/or teaching certification. The existing program consists of twenty (20) hours of coursework and nine (9) hours of practicum experience offered in the following sequence:

SPED 250 Survey of Exceptional Children & Adults
SPED 319 Assessment: Severe Handicaps
SPED 320 Curriculum: Severe Handicaps
SPED 487 Practicum (3 credits)

SPED 321 Instructional Programming: Severe Handicaps
SPED 322 Physical Handicaps: Characteristics & Methods
SPED 381 Behavior Management of Exceptional Students
SPED 487 Practicum (3 credits)

SPED 323 Teacher Parent Consultation: Handicapped Populations
SPED 324 Classroom-based Language Instruction: Handicapped Populations
SPED 325 Secondary/Adult Programming: Severe Handicaps
SPED 487 Practicum (3 credits)

See Figure 1 for a Student Program Plan.

Program Competencies

Each of the courses is designed to train seven competencies related to a specific skill area needed to provide instruction to severely/profoundly handicapped students. Program competencies were developed in accordance with existing professional standards (TASH, 1980). Teachers of students with severe/profound handicaps require a variety of specialized skills to meet individual educational and related service needs (Whitten & Westling, 1985). Behavior management strategies, adapted assessment procedures, and techniques for positioning, handling, and feeding are skills essential to appropriate programming for SPH students (Wilcox, 1977). Training in specialized skills is especially important for teachers in rural areas, where other professional personnel may not be available and teachers are required to provide services such as speech/language therapy, physical therapy and intervention for severe maladaptive behaviors.

A list of competencies for all program courses is included in Figure 2.

The program utilizes a competency-based format with pretestings, individualized training plans and final comprehensive evaluations. Competency-based teacher education (CBTE) has been recommended as an important factor in improving teacher training programs in special education (Blackhurst, 1977). CBTE is an instructional delivery system in which competencies and assessment criteria are specified in behavioral terms, and alternative learning activities are offered (Houston & Howram, 1972). The application of a competency-based approach to the SPH program enables skill acquisition by trainees to be documented more effectively. Pretests have been constructed for courses in the program to assess knowledge, synthesis and simulated application skills on SPH and rural competencies. Lecture notes, individual and group in-class activities and reading are prepared to train each competency. Assignments, quizzes, interviews and final comprehensive exams assess trainee competency acquisition.

Program Organization and Delivery

The SPH Program is currently organized to serve trainees in cohort groups at multiple sites in different geographic locations across the 33 counties found within the WVU service area. Coursework and practicum experiences are offered in the sequence outlined above across a two year time period by university personnel traveling to rural sites as needed. To date, coursework has been offered to students at three sites in the northern part of the state while a need for training has been identified at sites serving the southeastern, southwestern and northern panhandle regions of the state. No other programs are currently available or planned within the state. Consequently the West Virginia Department of Education has requested the delivery of the WVU Program to all areas of the state. This request will necessitate further changes in the program in the future. The program permits delivery of coursework instruction and supervision of practicum experiences by field-based personnel in cooperation with university faculty. Each course is designed as a complete package containing pretest materials, individualized study guides, syllabus, assignments, lecture notes, individual and group class activities, quizzes and interviews, and a final comprehensive exam. Each practicum experience is summarized in a practicum handbook containing competency requirements, procedures for observing and evaluating teaching competencies, appropriate supervisory techniques, and evaluation forms.

Practicum Facilities

The SPH Program provides three (3) practicum experiences for demonstrating program competencies at intervals distributed throughout the program. Practicum experiences are conducted on-the-job in the trainees' own rural work settings for those currently employed to provide direct education or training services to individuals with severe/profound handicapping conditions. When trainees are not so employed or are working in administrative or supervisory roles, temporary placements are located to permit direct contact with severely handicapped students during practica. To be eligible for the practicum experience, sites must meet the following qualifications:

1. service providing education or training that meets state program standards for severely/profoundly handicapped individuals;
2. direct instructional contact with at least four (4) individuals appropriately classified as severely/profoundly handicapped by state guidelines at ages ranging from 6 to 23 years;
3. permission from the building principal or agency director for practicum to be conducted in the employment setting.

NOTE 1: Because so few personnel in the state of West Virginia possess appropriate training and certification in Severe/Profound Handicaps at the present time, the more traditional Master Teacher Model of practicum experience cannot be provided; university faculty and field-based personnel from this project will provide all practicum supervision to trainees. In the few rural locations where Master Teachers may be available, they are also employed to provide supervision during the practicum experience.

NOTE 2: Preference is given to rural practicum sites that meet federal guidelines for providing educational services in the least restrictive environment, i.e. within public school buildings also serving non-handicapped students of similar chronological age. Since many school systems in West Virginia are still in the process of integrating SPH programs into local schools, some trainees may complete practicum requirements in employment settings housed within residential facilities, day schools and self-contained classrooms.

The SPH Program provide practicum supervision following techniques of the clinical spervision model (Acheson & Gall, 1980), which focuses on observation and evaluation of teaching to foster professional learning and gowth. Measurement of performance in terms of behavioral objectives (Eber & Elgart, 1979) allows practicum supervisors to make data-based decisions about trainee acquisition of rural and SPH program competencies. Arranging for observation of trainees in their work settings allows the program to take advantage of an optimal setting for demonstrating and proving teaching skills (Grant et al., 1979; Russell, 1971). Clinical supervision of trainees on-the-job allows project staff to offer more realistic and functional training experiences for SPH teachers.

Recruitment and Retention Procedures

Personnel shortages in West Virginia have been attributed to the failure to attract, employ or retain qualified professional teachers in rural areas (Ludlow, 1985). Recruitment efforts are aimed at locating individuals currently living in and committed to rural areas. Such local personnel, once trained, are more likely to maintain employment, reducing teacher turnover and improving program stability (Bina, 1981; Marrs, 1983; Wilson, 1981). The priority recruitment group is individuals currently employed to provide educational services to severely handicapped students, since they require and desire training but are unable to pursue full-time studies on campus (Hull & DeSantos, 1979; Culbertson, 1974). The second priority group is those living and/or working in the geographic area and expressing interest in learning to work with severely handicapped students. The last priority group is students not living in rural areas but expressing interest in future employment in rural areas in the area of Severe/Profound Handicaps.

Difficulties in retaining special education personnel in rural areas have been associated with teacher burnout. Several factors that increase the likelihood of burnout in teachers have been identified: lack of a sense of teaching efficacy, inability to detect small changes in progress, minimal support from administrators and pressure from parents (Ysseldyke & Algozzine, 1982; Zabel & Zabel, 1980; Weiskopf, 1980). A recent study indicated that job stress contributes to burnout and teacher job dissatisfaction among special educators in rural school systems in West Virginia (Knowles, 1980). Retaining qualified personnel in rural programs is considered essential to maintaining the stability and quality of special education services to severely handicapped students.

The program attempts to address retention concerns by developing local support groups at each rural site by bringing together students, program graduates, field-based personnel and university faculty as well as a network by joining together all sites along with other resource personnel around the state. The support groups allow rural teachers of severely handicapped students to share problems, solutions and concerns, to consult with qualified and experienced field-based resource persons, and to receive advice and technical assistance from university faculty when needed. The network enables faculty to facilitate interaction across sites by suggesting consultants, collecting data on common concerns for presentation to state agencies, and developing a resource directory of persons serving severely handicapped students.

Program Evaluation

The WVU Special Education Program uses an evaluation plan designed within the Discrepancy Evaluation Model (Provus, 1971) to evaluate the effectiveness of all training programs. Measurement procedures have been developed to collect data as input for formative and summative decisions concerning development and modifications of teacher training programs.

In the SPH programs, evaluation of trainees, program processes, and graduates proceeds according to the following procedures:

1. Transcripts and other records are examined to determine if applicants meet requirements for admission to the program.

2. Prior to program entry, trainees and advisor determine specific program goals and training needs based on the Student Entry Interview and design the Student Program Plan.

3. Student acquisition of competencies during training is measured through course projects and examinations, and the student teaching evaluation submitted by the cooperating teacher and university supervisor.

4. Information about practicum sites and personnel is collected from trainees and cooperating teachers at the end of each practicum session.

5. Feedback on each course is obtained through course instructor evaluation forms; instructors are free to select the University Senate form or to design a form specifically related to the content and methods of an individual course.

6. The Student Exit Survey is distributed to graduating trainees to collect data on course availability and accessibility, use of facilities and resources, and quantity and quality of faculty and advisor time.

7. The Graduate Follow-up Survey is mailed to program graduates after their first year of employment to assess graduates perceptions of their proficiency in competency areas, the need for and frequency of use of competencies in the classroom setting, and the contribution of the training program to skill acquisition.

8. The Graduate Employer Survey is used to obtain information concerning the performance of graduates in relation to other employees, the usefulness of program competencies in the teaching situation and graduate proficiency and impact on the exceptional population.

Information obtained from the various evaluation procedures described above is used as input for formative and summative decisions affecting program modifications as well as for long range planning decisions, including potential in-service needs. Specifically, in the Discrepancy Evaluation Model, information obtained from evaluation procedures is compared against program standards. The standards which have been selected by the Department of Special Education are as follows:

1. When the measure is a two-choice response, the percentage of respondents selecting the positive alternative must be 67% or better on any item.

2. When the measure is a continuum of responses, the mean response across respondents must be better than the score which represents .67 of the total possible score (e.g., 3.5 on a 5-point scale).

Practicum experiences are evaluated by surveys completed by trainees at the end of each practicum. Trainees are asked to rate the appropriateness of requirements, the effectiveness of supervisory personnel, and the usefulness of procedures. The overall program is evaluated by trainees just prior to graduation. The survey form requires trainees to rate the efficiency of operational aspects of the program as well as their own proficiency in program competencies. The impact of the program on teaching performance is evaluated by graduates and their employers approximately one year following completion of the program. Mail surveys ask graduates to report on their employment status and professional activities and to rate the usefulness of program competencies on the job as well as their own degree of skill. Employers are asked to rate the usefulness of competencies, the proficiency of graduates and their employability compared with others.

The first rural cohort group completed the SPH training program in 1985. Program evaluation data for this group is presented in Figures 3, 4 and 5. The majority of trainees expressed satisfaction with the program and its effectiveness in developing competencies. They reported that most competencies were extremely useful on the job, especially those in behavior management, instructional programming, parent consultation, and alternative communication training. The program was also successful in increasing the pool of trained and certified teachers in Severe/Handicaps in West Virginia . All 10 trainees employed in public school settings have remained in their positions for over two years; five (5) trainees left institutional settings, four to take public school teaching positions, one to go work for an advocacy agency. Three (3) institutional trainees were promoted to supervisory positions upon completion of the program and are now training other staff members. Only three (3) trainees left the state to take employment in other areas, although each remained in the area of Severe/Profound Handicaps.

To summarize the operational aspects of this on-the-job program, the following strengths and weaknesses have been identified.

Strengths:

1. improvement of accessibility of specialized training programs to teachers in rural areas;
2. development of a support system for rural special educators through a local cohort group;
3. use of university personnel for technical assistance in rural classrooms;
4. more practical application of training program competencies in on-the-job settings.

Weaknesses:

1. expense of travel for instructional and supervisory personnel for university to rural training sites;
2. time and energy demands on faculty (including long distance travel, unoccupied time between observation visits, and overnight stays;
3. limited trainee access to university library and personnel resources;

4. difficulties in demonstrating and objectively verifying competencies in practicum settings without continuous supervision.

Although it can be concluded that on-the-job training is an effective model for training teachers in rural areas, a number of issues remain to be resolved.

Issues:

1. what employment situations serve as appropriate practicum experiences? (rural programs may have only one or two students, be poorly supplied with special equipment, or be located in remote locations with little opportunity for integration with non-handicapped peers or community-based training).
2. how can coursework be delivered effectively at rural sites? (supplementary readings, audiovisual aids, curriculum materials may need to be purchased and made available for use at several sites).
3. how can coursework instruction and practicum supervision be scheduled to reduce stress on faculty? (long travel distances, hazardous road conditions and night classes place unusual demands on faculty time and effort).

The overall results suggest that this on-the-job training program was successful in preparing rural teachers of students with Severe/Profound Handicaps and reducing the critical teacher shortage in the state of West Virginia. Many aspects of this field-based model of training may also be applicable to SPH programs in other rural areas of the country as well as for programs in other low incidence areas of special education.

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FIGURE 1
WVU SPECIAL EDUCATION
STUDENT PROGRAM PLAN

Severe/Profound Handicaps Area

Name: ________________ Student No. ____________ Date of Entry ______

Option: Degree/Certification   Certification Only   Degree Only

I. REQUIRED COURSES

Proposed Time	Actual Time	Grade	Course		Hours
			SPED 250	Survey of Exceptional Children	3
			SPED 319	Assessment: Severe/Profound Handicaps	3
			SPED 320	Curriculum: Severe/Profound Handicaps	3
			SPED 321	Instructional Programming: Severe/Profound Handicaps	3
			SPED 322	Physical Handicaps: Characteristics and Methods	3
			SPED 323	Teacher/Parent Consultation: Handicapped Populations	3
			SPED 324	Classroom-based Language Intervention Handicapped Population	3
			SPED 325	Secondary/Adult Programming: Severe/ Profound Handicaps	3
			SPED 381	Behavior Management of Exceptional Individuals	3
			SPED 487	Practicum	9

II. APPROVED ELECTIVES

____ ____ ____ ________________________________ ____

____ ____ ____ ________________________________ ____

Anticipated Graduation Date: ____________________ Total Hours: ____

The above constitutes a mutually acceptable and contracted program of study toward certification/Master's degree in Special Education.

Student Signature: ____________________ Date: ______

Advisor Signature: ____________________ Date: ______

FIGURE 2
COURSE COMPETENCIES
SEVERE/PROFOUND HANDICAPS PROGRAM

Assessment: Severe/Profound Handicaps

Trainees will:

1. Explain principles and practices of assessment for individuals with severe handicapping conditions;
2. Select, administer and adapt assessment instruments for students of different ages with various cognitive, sensory and physical impairments;
3. Describe and evaluate formal measures of assessment used for screening and diagnosis;
4. Describe, evaluate and develop informal measures of assessment used for screening and diagnosis;
5. Design assessment procedures to evaluate pupil progress and program effectiveness;
6. Interpret, integrate and make use of assessment results in planning programs for severely handicapped students;
7. Discuss legal and ethical issues in the selection, administration and interpretation of assessment procedures for identification and placement of handicapped students.

Curriculum: Severe/Profound Handicaps

Trainees will:

1. Identify learning and behavioral characteristics of students with severe/profound/multiple handicaps.
2. Describe models and practices of educational services for students with severe handicapping conditons.
3. Discuss the assumptions, advantages and disadvantages of the developmental, behavioral, and functional models of curriculum.
4. Develop annual goals and short term objectives for the individualized education plan (IEP).
5. Select, prioritize and write task analyses for goals in various content domains.
6. Adjust content emphases to suit the age of students.
7. Evaluate and adapt curriculum guides and programs for specific handicapped students.

Instructional Programming Severe/Profound Handicaps

Trainees will:

1. Explain principles and practices of instruction for severely handicapped students;
2. Arrange instructional settings to accomodate individual and group needs;
3. Select, adapt and design insructional materials to teach functional skills;
4. Plan lessons to reflect individual IEP goals and objectives;
5. Design instructional programs for acquisition and mastery of skills;
6. Design instructional programs for generalization and maintenance of skills;
7. Evaluate instructional effects and student progress.

Physical Handicaps: Characteristics & Methods

Trainees will:

1. Describe patterns of normal physical development and functioning of the major anatomical systems of the human body.
2. Identify characteristics and educational implication of various types of physical disabilities, diseases, sensory deficits, degenerative conditions and mental retardation syndromes.
3. Discuss the legal, ethical and practical issues related to accessibility, safety, medication and related services.
4. Demonstrate proper methods of positioning, transferring and caring for personal medical needs of individuals with physical disabilites.
5. Implement activities to develop grossmotor, finemotor sensorimotor and motor-related cognitive skills.
6. Implement activities to teach self care and independent living skills to physically handicapped students.
7. Select and develop curricular, instructional, mechanical adaptations necessary for teaching individuals with severe or multiple disabilities.

Teacher/Parent Consultation: Handicapped Populations

Trainees will:

1. Describe the historical, legal and social bases for parent involvement in special education;
2. Discuss theories of family structure and development;
3. Identify the financial, social and emotional impact of a handicapped child on the family;
4. Communicate effectively with parents and sibblings of handicapped children in counseling and consultive interactions;
5. Design individuals or group programs to educate/train parents and siblings of handicapped;
6. Communicate effectively with professionals and paraprofessionals on team planning and consultive interactions;
7. Design individual group inservice training plans for professionals or paraprofessionals

Classroom-Based Language Intervention: Handicapped Populations

Trainees will:

1. Discuss theories of language development and language intervention approaches;
2. Describe the normal sequence of langauge development and anomalies associated with handicapping conditions;
3. Conduct assessment of vocal and non-vocal communication skills;
4. Design and implement instructional programs to establish prelanguage communicative behaviors.
5. Design and implement instructional programs for acquisition, generalization and maintenance of basic communication skills;
6. Design and implement instructional programs to increase length grammatical complexity, semantic diversity and intelligibility of communication;
7. Evaluate communication training programs and materials.

Secondary/Adult Programming: Severe/Profound Handicaps

Trainees will:

1. Identify principles and practices of secondary and adult education for persons with severe/profound handicaps;
2. Select, evaluate, modify and develop curricula for secondary/adult programs;
3. Design instructional activities to teach skills for independent living;
4. Design instructional activities to teach skills for community participation;
5. Design instructional activities to teach skills for productive employment;
6. Discuss special concerns of the secondary/adult program: sexuality, marriage, adult living arangements, right to personal freedom and choice, and guardianship;
7. Identify services provided by public and private agencies to handicapped adolescents/adults and their families.

Behavior Management of Exceptional Individuals

Trainees will:

1. Describe behavior in observable, measurable terms, and record behavioral data objectively, accurately and systematically.
2. Identify principles, contingencies and schedules of reinforcement.
3. Collect and analyze data to evaluate interventions in behavior management programs.
4. Select and implement techniques for increasing appropriate behaviors.
5. Select and implement techniques for decreasing inappropriate behaviors.
6. Develop and implement procedures for obtaining stimulus control over behavior, for generalizing behaviors to other stimulus conditions, and for maintaining behavior changes over time.
7. Discuss the legal and ethical issues related to the use of behavior management with handicapped individuals.

Practicum

Trainees will:

Assessment

1. Identify and evaluate the formal and informal assessment instruments currently used by the agency and the approved process for obtaining, collecting and recording assessment data;
2. Develop a battery of instruments to use in planning instructional programs and documenting student progress;
3. Prepare, write and deliver an assessment report to apparent or guardian;

Curriculum

4. Describe, evaluate and modify curriculum currently in use and document, analyze effects of modifications on student progress;
5. Critique and revise student Individual Education Plans (IEPs);
6. Design, implement and evaluate a plan for integration of students into school or community activities involving nonhandicapped peers;

Instruction

7. Chart, analyze and revise schedule of teacher time spent in direct instruction, related service, administrative duties, other activities.

8. Design, implement and evaluate an instructional program through acquisition, generalization and maintenance of skill development;
9. Design, implement and evaluate a plan for community-based training.

Physical Handicaps

10. Develop, implement demonstrate and evaluate a daily schedule for postitioning and trasferring physically handicapped students in a training setting;
11. Develop implement and evaluate an environmental arrangement plan for a classroom of physically handicapped students;
12. Adapt tests, materials and equipments for students with physical and sensory impairments.

Consultation

13. Develop, log, analyze and revise a contact system for regular communication with parents/guardians;
14. Develop, implement and evaluate a plan to use support personnel for instructional assistance to severely handicapped students;
15. Develop, conduct and evaluate a training program for parents or inservice workshop for professionals aspect of instructional programming for severely handicapped students;

Language

16. Identify language objectives for severely handicapped students and incorporate into training in all curriculum areas;
17. Design, implement and evaluate a program to teach an alternative communication mode to nonverbal students;
18. Develop implement and evaluate a training program to facilitate parent participation in language training in the home and community;

Secondary-Adult

19. Conduct a community survey of opportunities for residential placement, vocational training or employment and recreation or social activities for adults with severe handicaps;
20. Develop a plan for transitioning an adult with severe handicaps from school to community service;
21. Document activity in an advocacy role to secure community services for a severely handicapped adolescent or adult;

Behavior Management

22. Identify agency policies and personal philosophy or managing apporpriate and inappropriate behaviors and outline a Contingency Management Plan ranking interventions from least to most drastic alternatives;
23. Design, implement and evaluate a recording/charting system to operate the Contingency Management Plan;
24. Design, implement and evaluate behavior management programs to manage behaviors of individuals and small groups;

FIGURE 3
EVALUATION DATA
PRACTICUM STUDENT SURVEY
SPH TRAINING PROGRAM/FY 84-85

N = 29

	YES %	NO %	UNDECIDED %
SITE	.72	.22	.06
EXPERIENCE	.81	.12	.07
UNIV. SUPERVISOR	.64	.17	.09

STUDENT EXIT SURVEY
SPH TRAINING PROGRAM/FY 84-85

N = 28

	YES %	NO %	UNDECIDED %
PROGRAM	.85	.06	.09
COURSEWORK	.83	.05	.12
FACILITIES	.21	.10	.40
FACULTY	.76	.19	.03
PRACTICUM	.73	.10	.07

COMPETENCIES	DEVELOPMENT %			PROFICIENCY %		
	YES	NO	UNDECIDED	STRONG	ADEQUATE	WEAK
FOUNDATIONS	.74	.05	.04	.54	.32	---
ASSESSMENT	.62	---	.04	.43	.41	---
MANAGEMENT	.71	.06	---	.57	.28	---
PROGRAMMING	.76	.03	.03	.54	.38	---
COMMUNICATION	.89	---	.05	.54	.38	---
RESOURCE USE	.71	.13	.02	.52	.34	.02
EVALUATION	.77	.02	---	.41	.36	---

FIGURE 4
EVALUATION DATA
GRADUATE FOLLOW-UP SURVEY
SPH TRAINING PROGRAM/FY 84-85

N = 13

DEMOGRAPHIC DATA

1. Employment	
WV	10
Other	3
Unemployed	-
2. Agency	
school	6
other	8
3. Position	
classroom	8
other	6
4. Setting	
self cont.	4
res. facility	8
other	1

5. Type EC	
SPH	6
other	14
6. Number EC	
10	8
10-25	3
26-100	2
100	-
7. Age	
preschool	3
elementary	2
secondary	4
8. Time Employed	
1 year	-
1-3 years	3
3 years	10

9. Certification	
permanent	5
temporary	-
other	3
none	4
10. Status	
MA	8
MA+	3
other	7
11. Activities	
membership	7
meetings	9
publication	-
presentation	3

COMPETENCIES	USE %			PROFICIENCY %		
	YES	NO	UNDECIDED	STRONG	ADEQUATE	WEAK
FOUNDATION	.74	.20	.05	.38	.60	---
ASSESSMENT	.83	.15	.03	.52	.43	.05
PLANNING	.88	.15	---	.71	.23	.02
ORGANIZATION	.75	.14	.06	.51	.48	---
MANAGEMENT	.85	.12	.03	.58	.38	.03
PROGRAMMING	.85	.11	.03	.51	.45	.02
EVALUATION	.75	.18	.06	.48	.49	.02
COMMUNICATION	.72	.25	.03	.45	.46	.06
PROF DEVELOPMENT	.85	.14	.02	.43	.48	.02
NONTEACHING RESP	.82	.17	.02	.51	.14	.03

FIGURE 5
EVALUATION DATA
GRADUATE EMPLOYER DATA SURVEY
SPH TRAINING PROGRAM/FY 84-85

N = 17

DEMOGRAPHIC DATA

1. Type EC	
SPH	14
other	3

2. Type Agency	
school	10
other	7

3. Training	
none	4
limited	10
extensive	2

4. Time Supv.	
1 year	2
1-3 years	6
3 years	6

5. Interaction
1 hour
1-5 hours
5 hours

6. Ratings	BETTER	SAME	WEAK
knowledge	.71	.29	---
skill/teach.	.82	.06	.12
interaction	.59	.41	---
attitude/ teaching	.76	.18	.06
attitude/EC	.82	.12	.06
profession- alism	.53	.47	---

7. Practices	YES	NO
reemploy	.88	.06
hire	.94	---

COMPETENCIES	NEED %			PROFICIENCY %		
	YES	NO	UNDECIDED	STRONG	ADEQUATE	WEAK
FOUNDATIONS	.74	.01	.07	.51	.26	.06
ASSESSMENT	.74	.04	.05	.49	.25	.08
PLANNING	.81	.01	---	.62	.13	.06
ORGANIZATION	.76	---	---	.62	.13	.06
MANAGEMENT	.76	---	---	.51	.18	.08
PROGRAMMING	.73	---	.04	.50	.18	.08
EVALUATION	.74	---	.02	.54	.18	.07
COMMUNICATION	.92	.01	.27	.53	.33	.07
PROF DEVELOPMENT	.92	.02	.06	.60	.28	.05
NONTEACHING RESP	.99	.01	---	.53	.33	.02

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